



ACE EXAMINATION RECORD

5th DAN	Date / /	PLACE
SO SAN:		Result
SE JONG:		

6th DAN	Date / /	PLACE
TONG IL:		Result

1st DAN	Date / /	PLACE
KWANG GAE:		
PO EUN:		
GAE BAEK:		
FTS :	FS:	
FFP:		
RTK:	Result	
FTK:		
THEORY:		

NAME : _____

TKD SCHOOL : _____

COMMENCED TRAINING ON : _____

ADDRESS: _____

TEL: _____

Date of Birth: ____ / ____ / ____

Height: _____ cm Weight: _____ kg



STICK THE
ADHESIVE
LICENCE HERE

I Hereby submit this application for grading & state that I will accept the result of the examiners board. I hold myself solely responsible for any injury that I may sustain in the course of the examination. I certify that the facts stated are correct & that I am fit to take the requested grading:-

Parent/Guardian or
18+ Applicant Signature: _____ Date: ____ / ____ / ____

Instructor's Signature : _____

2nd DAN	Date / /	PLACE
EUI AM:		
CHOONG JANG:		
JUCHE:		
FTS :	FS:	
KHS:		
FHK:	Result	
OHK (B):		
THEORY:		

3rd DAN	Date / /	PLACE
SAM IL:		
YOO SIN:		
CHOI YONG:		
FTS :	SD:	
BFS:		
MAK (360):	Result	
FRTK:		
THEORY:		

4th DAN	Date / /	PLACE
YONG GAE:		
UL JI:		
MOON MOO:		
FTS :	SD:	
FT:		
OHK (S):	Result	
FTWK:		
THEORY:		