

**EMPOWER MARTIAL ARTS - KAJUKENBO KARATE
TEST REQUEST FORM**

NAME _____ DATE _____

BIRTHDATE _____ (month, day, year)

BELT TESTING FOR _____ (Japanese Term)

DATE OF PREVIOUS TEST _____ (reference certificate)

1. What are your martial arts strengths? (**name 2**) _____

2. What martial arts areas do you need to improve on? (**name 2**) _____

3. What improvement(s) have you made since your last test? _____

Skill	Grade	Instructor Comments
1. Kicking		
2. Punching		
3. Blocking		
4. Basic Series		
5. S.D. Series		
6. Kata		
7. Kumite		
8. Empty Hand F.S. S.D.		
9. Weapon F.S.S.D.		
10. Knowledge		
11. Attitude		
12. Misc.		

Additional comments may be documented on the back of this page.