



# MAJOR TAE KWON DO ACADEMY BELT TEST APPLICATION

First Name _____		Last Name _____	
Age _____	Date of Birth ____ / ____ / ____	Please put a check mark next to time!	
FRIDAY: 5 p.m. _____ 6 p.m. _____ 7 p.m. _____		SATURDAY: 10 a.m. _____ 11 a.m. _____	

Please return this form and \$40 testing fee prior to testing date. A \$10 late fee will be added for forms turned in on test day. **Please put a check mark next to your present belt rank:**

FRESHMAN	SOPHOMORE	JUNIOR	SENIOR
_____ White	_____ High Green	_____ High Red	_____ 1st High Brown
_____ Yellow	_____ Blue	_____ Brown	_____ 2nd High Brown
_____ Orange	_____ High Blue	_____ High Brown	
_____ Green	_____ Red		

CONTENT	MIND	BODY	SCORE
<b>PATTERN/ HYUNG</b>	Concentration	Stance	A
	Determination	Balance	B
	Focus	Flexibility	C
	Perseverance	Control	D
<b>FREE SPARRING</b>	Enthusiasm	Ki-Hap	
	Confidence	Accuracy	A
	Cooperation	Agility	B
	Determination	Concentration	C
	Discrimination	Speed	D
<b>BOARD BREAKING</b>	Respect	Strength	
	Self-Control	Timing	
	Concentration	Accuracy	A
	Confidence	Focus	B
	Self-Awareness	Ki-Hap	C
Self-Dependence	Power	D	
		Speed	

**GENERAL COMMENTS:**

\_\_\_\_\_  
 JUDGE'S SIGNATURE
 PAID \_\_\_\_\_