



GRADING FORM

DAN GRADE AUTHORITY

First Name:		Surname:	
Age:	JDMA License No:	Expiry:	Current Grade:
Club Name:		Club Affiliation No:	
Dan Grade To Be Taken:			

I hereby give permission that the above named person to undertake a Dan grading at:

Venue:	Grading Date:	
Instructors Name:	Signed:	Date:

DAN GRADE ASSESSMENT REPORT

I, the undersigned Senior Instructor confirm that I have assessed the above applicant and that his/her standard of Karate is of a level reasonable enough to attempt the grading applied for. They have been in regular training and their standard of Karate is:

KIHON	KATA	KUMITE
%	%	%
Assessor's Name:		
Grade:		Date:
Club Name:		JDMA License No:
Signed:		

If there is no resident 3rd Dan instructor in the candidate's club, there are two options available for the completion of this assessment:

Option 1 - Contact be made with an instructor of relevant grade, in the local area/region, to attend and make such an assessment.

Option 2 - Assessments can be carried out at National/Regional events – please contact the Technical Committee at sensei_jonathan@judachi-martialarts.co.uk