

**Hickey Karate Center**

***Request for Karate Black Belt Testing***

Karate: \_\_\_\_\_ JuJitsu: \_\_\_\_\_ Taekwondo: \_\_\_\_\_ Kobudo: \_\_\_\_\_

Name: \_\_\_\_\_

Current Rank: \_\_\_\_\_ Date of Last Promotion: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

EMail: \_\_\_\_\_

Phone: \_\_\_\_\_

Number of Classes Attended Since Last Test: \_\_\_\_\_

Number of Classes Attended in last 3 Months: \_\_\_\_\_

Karate:

List at least two special karate kata you will perform at the test

\_\_\_\_\_

Write out your Kwan Bu you will be performing for this test below

Complete Ebo Form on next page if required for this rank.

JuJitsu

Complete Ebo Form on next page.

Taekwondo

List at least two special Taekwondo Hyung you will perform at the test: \_\_\_\_\_

Write out your Kwan Bu you will be performing for this test below

Kobudo

Please list the weapon and kata you will be performing at the test.

Write out your Kwan Bu you will be performing for this test below.

Describe Kwan Bu in order to be performed.

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_

*This form due in July for the January test and in January for the July Test.  
Kwan Bu must be approved by a shihan or sensei instructor.*

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Describe Each EBO (Self Defense) Technique as you will perform each at the test.



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Kwan Bu must be approved by a shihan or sensei instructor.*