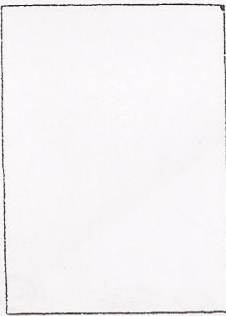


EXAMINERS: 1. _____
 2. _____
 3. _____

TANG SOO DO MI GUK KWAN ASSOCIATION, INC.
 DAN PROMOTION EXAMINATION FORM



For H.Q. Use

Testing Date _____

Gup Certification No. _____

Dan No. _____ (Not applicable for 1st Gups)

Studio Certification No. _____ Studio Name _____

Soc. Sec. # _____ Tel. # () _____ Birthdate / / _____ Male/Female _____

Last Name _____ First Name _____ M.I. _____

Address _____ (No. Street) _____ (City) _____ (State) _____ (Zip) _____
 (Country)

Occupation _____ Education Level _____

Date of entrance _____ Date of Last promotion _____

Your Instructor's Dan # _____ Rank _____ Name _____

Recommended by (Instructor) Dan # _____ Rank _____ Name _____

Teaching experience (if any, how long, where, and under whom?) _____

Awards (if any, results) _____

Present Rank _____ Requested Rank _____

Indicate your favorite technique _____

KI CHO (BASIC)		HYUNG (FORM)		IN NAE	
HAND		1ST		ILL SOO SIK	
FEET		2ND		HO SIN SUL	
		3RD		JA YU DEH RYUN	
		4TH		TUK SOO DEH RYUN	
TAC: NOTE				KYOK PA	
				GEN. REQUIREMENT	
				GEN KNOWLEDGE	
				CULT. & TERM.	
				AVERAGE	

I recommend the above person for promotion to _____ Dan. (10 Perfect/9 Excellent/8 Good/7 Average/6 Fail
 Mail to Tang Soo Do Mi Guk Kwan Association, Inc. T.A.C., P.O. Box 26096, West Haven, Ct. 06516