

THE UNITED STATES AIKIDO FEDERATION

142 West 18th Street, New York, NY 10011 • (212) 242-6246



APPLICATION FOR KYU PROMOTION

PLEASE TYPE

DATE OF TEST

Month/Day/Year

NAME

Last First Initial (middle)

USAF Membership No.

ADDRESS

Number Street City State Zip

DATE OF BIRTH

Month/Day/Year

PLACE OF BIRTH

SEX: M F

OCCUPATION

CITIZEN OF

I began practicing Aikido

Month/Year

and presently hold the grade of

Awarded to me

Month/Year

by

Examiner's Name

At an examination held at

Location

I have practiced

days since that grading

I hereby apply for the grading of:

Instructor

Dojo

I hereby recommend this application to the consideration of the Examination Committee.

Instructor's Signature

Applicant's Signature

TO BE COMPETED BY APPLICANTS FOR NIDAN & ABOVE

Yudansha Card No.

Aikikai Foundation Membership No.

(Date)

LIST PLACES AND DATES OF SEMINARS SINCE LAST EXAM

Seminar

Date

FOR OFFICIAL USE

Promotion by: Examination or Recommendation

Disposition: Pass

Fail

By

Examiner's Name

On

Mo/Day/Yr

At

Location of Examination

Approved by

USAF Examination Committee

Date