

Application for 6th Kyu Grade Examination

(Form 1) (PLEASE WRITE CLEARLY IN BLOCK CAPITALS)

Surname	Forename(s)
Address	•
Date of Birth	Date of starting aikido
Dojo	Instructor
Current Grade MUKYU (ungraded)	Date awarded n/a
Examiner	Venue
Number of practices since last grading (or since become	ing a member if ungraded)
Instructor's signature	Date
Grade awarded ROKKYU	
Examiner (print name)	Examiner's signature
Examiner (print name) Date	Venue Venue
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