



ATTIC TAEKWONDO BELT TEST FORM



Testing Fee \$ _____

PLEASE PRINT

Name _____ Date of Birth _____ Age _____

Address _____ City _____ State Zip _____

Phone Number _____ Desired Belt Size _____ EVEN IF YOU ARE TESTING FOR A TIP

Present Rank _____ Applied Rank _____

Date of Test _____

A+ A B C D COMMENTS

| | A+ | A | B | C | D | COMMENTS |
|---|----|---|---|---|---|----------|
| 1. STANCES AND MOVEMENT | | | | | | |
| 2. PUNCHING | | | | | | |
| 3. BLOCKS | | | | | | |
| 4. KICKS | | | | | | |
| 5. FORM | | | | | | |
| 6. BREAKING | | | | | | |
| 7. TERMINOLOGY | | | | | | |
| 8. PHILOSOPHY | | | | | | |
| 9. ETHICS | | | | | | |
| 10. SPARRING | | | | | | |
| 11. <i>Leadership Program Only:</i> WRITTEN TEST | | | | | | |
| 12. <i>Leadership Program Only:</i> FORM | | | | | | |
| 13. <i>Leadership Program Only:</i> CREATIVE FORM | | | | | | |