

Family Martial Arts Center

Student _____

Age _____ Student Number _____

ALL AGES - 2ND DAN THUNDER

**I.D. Size Photo
REQUIRED**

Test form, fee and
picture are due one
week before your test.

Num	Description of Technique	Grade
1	Creation Form – (20 Moves)	
2	Aikido 7,8 - Gekihajutsu	
3	One Step Punch Sparring 7,8 - Ilbo Son Kyurugi	
4	Creation Self Defense (2 techniques vs. knife)	
5	Grappling 7,8 (Choke 4, Arm Lock 4)	
6	Sparring Combinations 7,8	
7	Hand to Hand Combat (Sparring and/or Grappling)	
8	Breaking - 3 Elective Breaks	

Additional Assessment Items	
Terminology	
Discipline	
Effort	
Leadership (1 class/wk.)	

Comments:

Please return your test form within one week.

Examiner: _____

Result: _____ Date: _____