



## EXAM REQUEST FORM 2016

Please grade this student on the items below according to the following scale. If our students Do Not meet any of these qualifications either at home, at school or here at the Crescent Moon Karate Academy, we will hold the student's ranking until there has been satisfactory improvement.

STUDENT NAME: \_\_\_\_\_

### Teacher Input Section:

Teacher's Name: \_\_\_\_\_ School: \_\_\_\_\_

The student named above is doing satisfactory work and receiving passing grades. ☐ Yes ☐ No

Teacher Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*(Academic Teacher's Signature)*

### Parent Feedback

Parent's Name: \_\_\_\_\_ e-mail Address: \_\_\_\_\_

### My Son or Daughter:

- |  |  |
|--|--|
| <input type="checkbox"/> Shows respect to Parents/Guardians and Siblings | <input type="checkbox"/> Listens & Follows directions on the first request |
| <input type="checkbox"/> Demonstrates eye contact when being spoken to   | <input type="checkbox"/> Completes Chores and Responsibilities             |

Please complete the daily practice Chart Below. Whenever your child practices his/her martial arts at home Please chart their progress

Date: Minutes:	Date: Minutes:	Date: Minutes:	Date: Minutes:	Date: Minutes:	Date: Minutes:
Date: Minutes:	Date: Minutes:	Date: Minutes:	Date: Minutes:	Date: Minutes:	Date: Minutes:
Date: Minutes:	Date: Minutes:	Date: Minutes:	Date: Minutes:	Date: Minutes:	Date: Minutes:

### Adult Students (Please complete this portion to your best knowledge)

- |   |   |
|---|---|
| <input type="checkbox"/> I am receiving outstanding instruction | <input type="checkbox"/> I am practicing daily        |
| <input type="checkbox"/> My goals are being accomplished        | <input type="checkbox"/> I am always improving myself |

What two goals do you want to accomplish before your next belt exam?

1. \_\_\_\_\_
2. \_\_\_\_\_

Testing Date: \_\_\_\_\_ Black Belt Club Member: YES / NO Current Belt Size: \_\_\_\_\_

### Testing Procedures:

1. You must arrive 30 minutes prior to your test.
2. You must wear a complete uniform clean & pressed (Only official CMK Patches are allowed on your uniform)
3. Protective Equipment must NOT be tattered or taped. (Good Condition, and comfortably fitting)
4. All students testing should have all belt tips prior to the Testing day.

*I understand and have met ALL of the above requirements for the Testing.*

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Student Full Name: \_\_\_\_\_

Date: \_\_\_\_\_