

Individual Recommendation for Promotion

Name:	ame: First			Middle				st			
Address:	T IISt							Last State: 7in:			
_	Date of Birth:Date Started Judo:										
Current Dojo:	rrent Dojo:Current Instructor:										
Send Certificate	to:										
Is this a gift/s	urprise to th	ne applican	it?								
History:											
Rank	Date	Org.	g. Rank		Date	Org.	Rank		Date	Org.	
Ikkyu			3rd Da				6th Da				
1st Dan			4th Da				7th Da				
2nd Dan			5th Da	111			8th Da	all			
Katas Complete	d for this Pron	notion (Check	c as approp	riate):							
Nage-no-Ka				Ju-no-Kata				Other:			
Katame-no-Kaa				Other:	•			Other:			
Are you a currer	nt USA Judo rove you referee	eferee, if so,	what level?_								
Are you a currer	nt USA Judo c	lub member?	How long?	}							
How many USA	Judo membe	rs are affiliate	ed with your	club?							
Are any of your	athletes on the	e junior, senio	or, para or n	naster p	oint roster?						
If not the head/o	owner of the cl	ub, what cap	acity do you	ı serve ((coach/athlete/a	admin)?					
Do you host tou	rnaments, can	nps or clinics	? If so, nam	e a few:	:						
Are you a curre	nt USA Judo C	Certified Coac	h? If so, wh	nat level'	?:						
What was the la	ıst USA Judo r	national even	t you attend	led?							
In what capacity	/?										
-		-									
						nit a full shiai res					

***Applicant should attach copies of past certificates, special awards, judo resume and shiai contest records. Any information left blank must be explained on an attachment. Incomplete forms will not be considered by the Committee. For rank above sandan, athlete must submit a head shot photo.

Full eligibility/requirements by rank can be found on our website <u>www.usjudo.us</u> in the Promotions area.

PLEASE NOTE: DOCUMENTS SUBMITTED AS PART OF THE REQUEST FOR PROMOTION WILL NOT BE RETURNED TO THE APPLICANT.

Rank requesting:					E	Effective Date:					
Group B Promoting Organization:					G	Group B Promotion Chair:					
Individ	lual Recomm	nending Pror	notion (Coach	1)							
						above candida omotion commi		d these orga	anizations red	quirements fo	or the
	Signature					Date					
	Fe	ee's									
	1st Dan	\$150.00	3rd Dan	\$250.00	5th Dan	\$350.00	7th Dan	\$450.00	9th Dan	\$550.00	
	2nd Dan	\$200.00	4th Dan	\$300.00	6th Dan	\$400.00	8th Dan	\$500.00	10 th Dan	\$600.00]
Credit Card: Type: Numb				oer:		<i></i>	l	_/ Exp. Date:			
Code:Billing Zip:				_ Name on Ca	ard:						

Please send paperwork/check to USA Judo 1 Olympic Plaza Colorado Springs, CO 80909