Two Rivers Aikikai

Application for Kyu and Dan Examination:



Date of Examination:	41KIKAL
Your name:	
Your current rank:	Date of that test:
Where did that test take place?	
Name of instructor(s) who tested you:	
Rank that you are testing for:	Days practiced since last test:
Date you started Aikido: (month/year)	/
Name of your current dojo:	
Your instructor's name(s):	
Have you practiced at any seminars sinc	ee your last test? If so, please list by date:
Applicant's signature:	
Instructor's signature:	
For Instructors: Notes on test:	
Result of test: pass fail	