

Shinkyu Shotokan Ranking Sheet

8thkyu Blue Belt

BASICS			KATA			PRE-ARRANGE			KUMITE		
P	T	F	P	T	F	P	T	F	P	T	F
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PASS <input type="checkbox"/>	NEW RANK _____	FAIL <input type="checkbox"/>	NAME: _____	ate _____
-------------------------------	----------------	-------------------------------	-------------	-----------

BASICS			KATA			PRE-ARRANGE			KUMITE		
P	T	F	P	T	F	P	T	F	P	T	F
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PASS <input type="checkbox"/>	NEW RANK _____	FAIL <input type="checkbox"/>	NAME: _____
-------------------------------	----------------	-------------------------------	-------------

BASICS			KATA			PRE-ARRANGE			KUMITE		
P	T	F	P	T	F	P	T	F	P	T	F
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PASS <input type="checkbox"/>	NEW RANK _____	FAIL <input type="checkbox"/>	NAME: _____
-------------------------------	----------------	-------------------------------	-------------

BASICS			KATA			PRE-ARRANGE			KUMITE		
P	T	F	P	T	F	P	T	F	P	T	F
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PASS <input type="checkbox"/>	NEW RANK _____	FAIL <input type="checkbox"/>	NAME: _____
-------------------------------	----------------	-------------------------------	-------------

Graders Name _____ Date _____

Shinkyu Shotokan Ranking Sheet

9thkyu Blue Belt

BASICS			KATA			PRE-ARRANGE			KUMITE		
P	T	F	P	T	F	P	T	F	P	T	F
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PASS <input type="checkbox"/>	NEW RANK _____	FAIL <input type="checkbox"/>	NAME: _____	Dee Reynolds
-------------------------------	----------------	-------------------------------	-------------	--------------

BASICS			KATA			PRE-ARRANGE			KUMITE		
P	T	F	P	T	F	P	T	F	P	T	F
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PASS <input type="checkbox"/>	NEW RANK _____	FAIL <input type="checkbox"/>	NAME: _____	nin nin
-------------------------------	----------------	-------------------------------	-------------	---------

BASICS			KATA			PRE-ARRANGE			KUMITE		
P	T	F	P	T	F	P	T	F	P	T	F
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PASS <input type="checkbox"/>	NEW RANK _____	FAIL <input type="checkbox"/>	NAME: _____	
-------------------------------	----------------	-------------------------------	-------------	--

BASICS			KATA			PRE-ARRANGE			KUMITE		
P	T	F	P	T	F	P	T	F	P	T	F
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

PASS <input type="checkbox"/>	NEW RANK _____	FAIL <input type="checkbox"/>	NAME: _____	
-------------------------------	----------------	-------------------------------	-------------	--

Graders Name _____ Date _____