



North American San Shin Kai

Application for Dan Grades

I hereby apply to take the promotion test for the rank of _____ *dan*

Name _____ Member # _____

My present rank is _____ *dan*, received on the date _____

Applicant's signature _____ Date _____

Dojo affiliation _____

Dojo address _____

Instructor _____

Instructor's signature _____ Date _____

This space is for official use only.

Membership dues paid _____ Test fee paid _____

Test fee received by _____ Date received _____

Test results (circle one) PASS FAIL Retest Date _____

Test committee members

1) _____

2) _____

3) _____

4) _____

5) _____

North American San Shin Kai
P.O. Box 132 Boylston, MA 01505-0132
www.sanshinkai.org