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**www.chitf.org itfhq@chitf.org**

**International Dan certificate application form**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Gender: \_\_\_\_\_\_\_\_ D.O.B: \_\_\_M/\_\_\_\_D/\_\_\_YR/\_\_\_\_\_\_\_\_\_\_\_\_ Age: \_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Applied for rank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Nationality: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Education: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Occupation: \_\_\_\_\_\_\_\_\_\_\_\_\_ Tel.:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Dojang:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Instructor & rank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Your last certificate#: \_\_\_\_\_\_\_\_\_\_ Duration of training since last exam:\_\_\_\_\_**

**Signature of Examiner: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rank: \_\_\_\_ Date: \_\_M \_\_\_d \_\_\_\_\_ \_\_\_\_\_yr**

**Chan Hun ITF Authorized Examiner # and name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**- All certificates will be mailed to the affiliated main school address ONLY. Please write it CLEARLY below:**

**MAIL TO:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**CH ITF Head Quarter: received by: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

 **date received: \_\_m\_\_\_ d \_\_\_\_\_yr Payments: amount $\_\_\_\_\_ US, by\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Certificate#\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ issued on \_\_\_\_m \_\_\_\_\_d \_\_\_\_\_\_\_\_yr**

 **Data entered on \_\_\_\_\_m \_\_\_\_\_d \_\_\_\_\_\_yr**