	APPLICATION FOR PROMOTION TEST															
	2		Father Name						ATTACH THREE (03) PASSPORT							
Nationality			Address													
			Representing Sta				ate /	ite /							SIZE PHOTOS	
			Central Organiza				ation	1								
			Phone No:							Mobile			Email:			
NAME								DATE OF BIRTH			•					
First Name									Day			Current Grad	de		Applied	
Middle Name									Month			Dan Certificat No.	te		Dan	
Last Name									Year			Date of Issue	9		Gender	
I submit this application to the Promotion Board of KUKKIWON for a Promotion Test																
Date of Application												Applicant's Signature				
I honestly recommend the above person as a well-qualified applicant for the promotion test of Dan / Poom Grades																
Nationality	INDIA	Name of the Federation						TAEKWONDO FEDERATION			EDERATION O	F		RECOMN	IENDER	
Address of t	he	e			#14/10, 1st floor Mayor Krishnappa Road Name											
Federation				R.V.Cross Road (Near Minerva Circle) Bangaluru-560004. INDIA										Dan		
Tel / Fax / E-		0091 80 4155 4245 / 0091 80 41554245 / tkdindia2@Gmail.com No.														
To:																
The President, KUKKIWON (World Taekwondo Headquarters)																
Note :	1. Name															
	2. Dan Certificate No.: The Current Dan Number must be the one given by Kukkiwon or WTF															
	3. Recommended by: The recommender of applicant should ensure that no false statement will be found in the application. Otherwise, the Da after its issuance and recommender will not be allowed to make further recommendations.													an will be nullified even		
	4. Appli	cant w	ho is s	taying	abroa	d sha	II atta	ich a	document	to confirm r	eside	nce in the foreign cou	intry for mo	ore than 6 mont	ns.	