

Grading Form

Form

Form 006

Issue: 02



This document will be reviewed 3 years from the date of issue/review.

Prepared by: Mary Calafiore Signature: _____	Verified by: Patricia Tissera Signature: _____	Authorised by: Matt (Murat) Eryurek Signature: _____
Date: _____	Date: _____	Date: _____
Title: Club Member	Title: Club Committee Member	Title: Head Instructor

Grading Assessment Week: _____ Grading Exam Date: _____

Section 1: Member Details

Members: _____

<i>First Name</i>	<i>Middle Name</i>	<i>Surname</i>
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Parent / Caregiver Email: _____

Contact Numbers: _____

Home	Mobile	Work
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Belt Size: _____ Current Belt: _____ Dobok Size: _____

Section 2: Enrolment Day / Time Details

Class 1: _____ DAY _____ TIME

Class 2: _____ DAY _____ TIME

Section 3: Grading Assessment during Class time

(Instructors Use Only)

PASS FAIL

	<u>Mark (1-10)</u>	<u>General Notes</u>
Basic technique	_____	_____
Pattern	_____	_____
Sparring	_____	_____
Breaking	_____	_____
Self Defence	_____	_____
Kicking Technique	_____	_____
Body Stance	_____	_____
Overall	_____	_____

Instructors Comments: _____

Application Assessed by:

Instructors: _____

Membership Number	Signature	Date
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Section 4: Grading Exam		(Instructors Use Only)	<input type="checkbox"/> PASS <input type="checkbox"/> FAIL
	<u>Mark (1-10)</u>	<u>General Notes</u>	
Basic technique			
Pattern			
Sparring			
Breaking			
Self Defence			
Kicking Technique			
Body Stance			
Overall			
Instructors Comments:			
Application Assessed by:			
Instructors:			
	Membership Number	Signature	Date
Section 5: Overall Grading Result			
	<u>Grading Assessment during Class time</u>	<u>Grading Exam</u>	
Mark (1-10)			
Overall			

DOCUMENT END

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Change history

Issue number	Date	Description of change
01	-	Issue 01 document held in Team Taekwondo office.
02	November 2011	<ul style="list-style-type: none">• Transferred to new form template• Updated text as appropriate to provide clarity of information.

The change history page may be removed after this document has been issued.