



Individual Recommendation for Promotion

Name: _____
First Middle Last

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____ Date of Birth: _____

USA Judo ID: _____ Current Dojo: _____ Current Instructor: _____

Send Certificate to: _____

Rank History

Rank	Date	Org.	Rank	Date	Org.	Rank	Date	Org.
Ikkyu			3 rd Dan			6 th Dan		
1 st Dan			4 th Dan			7 th Dan		
2 nd Dan			5 th Dan			8 th Dan		

Katas Completed for this Promotion (Check as appropriate AND provide proof of completion):

<input type="checkbox"/>	Nage-no-Kata	<input type="checkbox"/>	Ju-no-Kata	<input type="checkbox"/>	Koshiki-no-Kata
<input type="checkbox"/>	Katame-no-Kata	<input type="checkbox"/>	Kime-no-Kata	<input type="checkbox"/>	Kodokan-Goshin-Jitsu

Check here if requesting rank promotion as an ATHLETE Please use the table at the end of this document to provide your results.

For Everyone:

How long have you been a USA Judo member? _____

What was the last USA Judo national event you attended? _____

In what capacity? _____

If coaching, what athletes did you coach? _____

Do you still compete? If so, at what level? _____

For Referees:

Are you a current USA Judo referee. If so, what level? _____

What events have you refereed at? _____

For Coaches:

Are you a current USA Judo Certified Coach? If so, what level? _____

Is your club registered with USA Judo? If so, for how long? _____

How many USA Judo members are affiliated with your club? _____

Are any of your athletes on a National Roster? If so, who? _____

If not the head/owner of the club, what capacity do you serve? _____

Do you host tournaments, camps or clinics? If so, name a few: _____

Applicants should attach copies of past certificates, special awards, judo resume and shiai contest records. Any information left blank must be explained on an attachment. Incomplete forms will not be considered by the Committee.

Applicants must submit a headshot photo for 4th Dan and higher.

Full eligibility/requirements by rank can be found at usajudo.com/forms.

Rank requesting: _____ Effective Date: _____

State Promoting Organization: _____ State Promotion Chair: _____

Individual Recommending Promotion (USA Judo Coach) _____

I, the above identified Group B Promotion Chair, do hereby affirm that the above candidate has satisfied these organizations requirements for the rank which is identified, as acknowledged by all members of this states promotion committee.

Signature

Date

	1 st Dan \$150		3 rd Dan \$250		5 th Dan \$350		7 th Dan \$450		9 th Dan \$550
	2 nd Dan \$200		4 th Dan \$300		6 th Dan \$400		8 th Dan \$500		10 th Dan \$600

Name on Card: _____

Card #: _____ Exp. Date: _____ CVV Code: _____

Billing Address: _____

Cardholder Signature: _____

Donation: \$ _____ Total Amount Submitted: \$ _____

APPLICATIONS FOR 4th DAN AND ABOVE WILL INCUR A \$50 NON-REFUNDABLE FEE. THIS FEE WILL BE INCLUDED IN THE TOTAL APPLICATION FEE IF APPROVED

**Please upload this document and payment through the athlete's profile at usajudo.sport80.com. Applicants may also send paperwork/check to:
USA Judo 1 Olympic Plaza Colorado Springs, CO 80909**

PLEASE NOTE: DOCUMENTS SUBMITTED AS PART OF THIS APPLICATION WILL NOT BE RETURNED TO THE APPLICANT

