UCHTA

**UTAH CHANG HUN TAEKWON-DO ALLIANCE BLACK-BELT TEST PAPERS CHECK LIST**

CANIDATE’S NAME: TEST FEE: TESTING DATE: TESTING LOCATION: EXAMINER NAME: EXAMINER DEGREE:

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RETURN TO STATE DIRECTOR BY:

**READ INSTRUCTIONS THOROUGHLY. PLACE A CHECK MARK AFTER COMPLETING EACH ITEM IN THE SPACE PROVIDED. PROVIDE TWO COPIES OF ALL FORMS AND ALL CERTIFICATIONS.**

1. **- UCHTA BLACK-BELT TEST PAPERS CHECK LIST (this document):**
2. **- UCHTA REQUEST FOR BLACK BELT FORMS:**
3. **- USTF APPLICATION FOR DEGREE CERTIFICATION:**

Application must be type written in full

Include one photo, no t-shirts please, head shot only, 1” X 1” to fit the appropriate box.

YOU DO NOT need to fill in the USTF Plaque. N/A

Your USTF Member Number is your 62-??? number

Community Service hours must have a Verification sent in with this application. Application must be signed by candidate.

ITF/USTF Certificate Number is your Black Belt Number, ie. A4-300 or USTF 4-300 Type in your instructor's name and degree on the instructors line.

Type in the Examiner’s name and degree if it is shown above. Otherwise leave blank.

The Place of Grading should be Salt Lake City, UT, rather than a specific facility.

1. **- UCHTA RELEASE AND WAVIER OF LIABILITY AND INDEMNITY AGREEMENT:**

Fill out all of the information except the "Received by" line.

Parent or legal guardian must sign the form if the candidate is a minor.

1. **- TESTING REQUIREMENTS SIGN OFF SHEET:**

Make sure you understand and meet all the USTF testing requirements. If you have any questions about these requirements check with your instructor and/or State Director.

Verify with your instructor that the community service hours you are to perform will be acceptable to fulfill the USTF Community Service Hours requirement for your testing, prior to submitting written verification.

1. **- COMMUNITY SERVICE VOUCHER:**

Must be typed by candidate and signed by authorized representative.

1. **- PROVIDE TWO (2) COPIES OF ALL CERTIFICATIONS FROM SEMINARS AND RECENT RANK CERTIFICATION INCLUDING:**

REFEREE, HO SIN SUL, WEAPONS DEFENSE, TECHNICAL, USTF INSTRUCTOR, AND MOST RECENT DAN CERTIFICATE.

**\*PLEASE SUBMIT TWO (2) COPIES OF ALL FORMS. PUT THE FORMS IN THE PACKET IN THE ORDER LISTED IN THIS CHECKLIST.**