



GLOBAL TAEKWON-DO FEDERATION

6-2400 Dundas Street West #404

Mississauga, Ontario

Canada L5K 2R8

DEGREE APPLICATION FORM

Tel: (905) 855-8828

(905) 855-8818

Fax: (905) 822-3388

E-Mail: gtfworldhq@accglobal.net

NAME IN FULL:

First Name Middle Initials Last Name

PRESENT ADDRESS:

Street No. and Name City or Town

Province or State Country Zip Code

TELEPHONE:

FAX:

E-MAIL:

DATE OF BIRTH:

____/____/____
Day Month Year

PLACE OF BIRTH:

City and Country

NATIONALITY:

Same as in Passport

GENDER:

Male or Female

HEIGHT:

____ cm/in

WEIGHT:

____ kg/lb

HAIR COLOUR:

EYES:

OCCUPATION:

EDUCATION:

NAME & ADDRESS
OF TAEKWON-DO
SCHOOL:

Photo

***Attach one picture here
Send with this application
One passport size photo &
one 2cm X 3cm photo**

PRESENT DEGREE:

GTF CERT. NO.:

LAST TEST DATE:

DEGREE APPLYING FOR:

PERSONAL HISTORY & THESIS ATTACHED:

(for 3rd degree and above only)

Signature of Applicant

Guardian if under 18 years of age

Date

Instructor's Name

Degree

Signature

Date

Date of Grading: Day ____ Month ____ Year ____ Place of Grading: _____

Examiner's Name: _____

Degree: _____

Signature: _____

Date: _____

Assoc. President or Authorized Deputy: _____

Signature: _____

Date: _____