Instructions

1. All questions are based on the period since your students last grading.
2. Application, questionnaire and payment must be complete and received 1 month prior to grading to be eligible for grading. This applies to all ranks. Late applications will not be accepted as per senate decision Dec. 2012.
3. All sections are mandatory. If you do not fill out a field, your application will be returned without approval.
4. When filling out the Training and Teaching schedule / timelines, it should only include training time (not extended breaks greater than two months)
	* Refer to section B – Definitions in the grading manual: “Active training”
5. In the **Applicants Instructor Section**, the definitions of *Recommending* and *Permission* are as follow:
	* Recommending: Instructor feels the candidate meets the requirements to be successful.
	* Permission: You are giving your student permission and asking the Jōseki board to evaluate your student and recommend pass/fail based on their performance.
6. For Special Circumstance Grading, refer to the grading manual for additional information.

What is to be submitted in an application package:

1. Student application section
2. Instructor application section
3. Completed Written Questionnaire
4. Payment of $100. E-transfer to payments@shintani.ca

**TO BE COMPLETED BY APPLICANT**

\*Application, and payment must be completed and received 1 month prior to grading to be eligible for grading. Late applications will not be accepted.

|  |  |  |  |
| --- | --- | --- | --- |
| **DATE** |  | **EMAIL** |  |
| **FIRST NAME** |  | **LAST NAME** |  |
| **MAILING ADDRESS** |  |
| **CITY & PROVINCE** |  | **POSTAL CODE** |  |
| **DATE OF BIRTH** |  | **GENDER** |   |
| **PHONE #** |  | **Passbook #** |  |
| **Pictures of Passbook Info Attached to Page 3** | [ ]  **YES** [ ]  **NO** | **PRESENT RANK** |  |
| **PASSBOOK UPDATED?** | [ ]  **YES** [ ]  **NO** | **DATE OF LAST GRADING**  |  |
| **CLUB** |  | **INSTRUCTOR** |  |
| **DATE OF ENROLMENT** |  | **Rank Applying For** | [ ]  Shodan[ ]  Nidan[ ]  Sandan[ ]  Yodan[ ]  Godan |

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| **TRAINING SCHEDULE** |
| **AVERAGE # HOURS/WEEK** |  | **AVERAGE # MONTHS/YR.** |  |
| **TEACHING SCHEDULE** |
| **AVERAGE # HOURS/WEEK** |  | **AVERAGE # MONTHS/YR.** |  |
| **DISABILITIES/ADAPTED MARTIAL ARTS** | * **Physical Impairment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Visual Impairment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Hearing Impairment: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Intellectual Disability: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
 |
| **WHAT ACCOMMODATIONS OR MODIFICATIONS WILL ALLOW FOR A SUCCESSFUL GRADING VENUE?****COMMENTS TO BE PROVIDED BY** **INSTRUCTOR:** | * **Shorter Grading Time: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Graded Alone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Graded In Small Group: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Breaks More Often: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Slower Pace: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
* **Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**
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| **RANK** | **DATE GRADED** | **INSTRUCTOR(S)** |
| **YELLOW** |  |  |
| **ORANGE** |  |  |
| **GREEN** |  |  |
| **BLUE** |  |  |
| **BROWN** |  |  |
| **RED (IF APPLICABLE)** |  |  |

|  |  |
| --- | --- |
| **BLACK BELT CLINICS**  | REQUIRED ANNUALLY. SHOULD NOT BE YOUR INSTRUCTOR |
| **DATE** | **LOCATION** | **LIST OF INSTRUCTOR(S)** |
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| --- | --- |
| **TOURNAMENTS**  | ENCOURAGED TO COMPETE OR PARTICIPATE IN 2 PER YEAR |
| **DATE** | **LOCATION** | **TOURNAMENT ARBRITRATOR/SENSEI SIGNATURE** |
|  |  |  |
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| **PRE-GRADING(S)** | HIGHLY RECOMMENDED |
| **DATE** | **LOCATION** | **LIST OF INSTRUCTOR(S) BELOW** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

**Attached Pictures of Information in Passbook (Registration Record, Grading Record, Clinics, Tournaments):**

**USE SEPARATE SHEET TO ANSWER THE FOLLOWING QUESTION (IF NECESSARY):**

What benefits have you achieved through Wado Kai Karate?

**TO BE COMPLETED BY INSTRUCTOR**

|  |  |
| --- | --- |
| **DATE** |  |
| **PROPOSED GRADING**  | **LOCATION** | **DATE** |
|  |  |
| **APPLICANT’S INSTRUCTOR SECTION** |
| **FIRST NAME** |  | **LAST NAME** |  |
| **PHONE #** |  | **EMAIL ADDRESS** |  |
| **CLUB NAME** |  | **CLUB LOCATION** |  |
| **PRESENT RANK** |  | **DATE OF LAST GRADING** |  |
| **INSTRUCTOR’S SENSEI** |  | **TEACHING CERTIFICATE#** |  |
| Are you giving this student permission to try for this rank or are you recommending this student for this rank. Please check the box below:[ ]  **PERMISSION**  [ ]  **RECOMMENDING** | Did you verify the students SWKKF passbook for all appropriate information/stamps/etc.? Please check the box below:[ ]  **YES** [ ]  **NO** |

|  |  |  |  |
| --- | --- | --- | --- |
| **APPLICANTS FIRST NAME** |  | **APPLICANT LAST NAME** |  |
| **Have you confirmed your students training schedule as recorded above?** [ ]  **YES** [ ]  **NO** |
| **Have you confirmed your students teaching schedule as recorded above?** [ ]  **YES** [ ]  **NO** |
| **DISABILITIES/INJURIES** **(Do you have any additional information to add to what your student has listed?)** |  |
| SPECIAL CIRCUMSTANCES | Do you request a special circumstances grading? [ ]  **YES** [ ]  **NO** |

**INSTRUCTOR ACCOUNTABILITY FORM**

**NOTE**: The following questions have been put into the grading applications to ensure instructors know and verify training information prior to the grading. By verifying the information below we are trying to avoid students attending gradings when they are not ready or have not met the time requirements for the rank. If your student has not met the criteria outlined in the SWKKF Grading Manual, please ensure you provide explanations as to why. All questions are based on the period since your students last grading.

|  |  |
| --- | --- |
| **QUESTION** | **ANSWER** |
| 1. Please indicate the minimum years required for the rank your student will be attempting to advance to.
 |  |
| 1. How many years has your student been actively training since their last grading?
 |  |
| 1. Has your student taken an extended break (anything greater than two months)
 | [ ]  YES[ ]  NO |
| * 1. If Yes, please indicate the length of the extended break.
 |  |
| 1. How many years has your student been active in the SWKKF?
 |  |
| 1. Please indicate the number of training hours/month required for the rank your student will be attempting to advance to. Please indicate the number of hours of training required as per the “Active Training” definition in the grading manual.
 |  |
| 1. List the average number of training hours/month your student has completed for this rank.
 |  |
| 1. What is the minimum number of tournament participation encouraged for this rank?
 |  |
| 1. Please indicate how many tournaments your student has attended.
 |  |
| 1. How many Black Belt Clinics are required for this rank each calendar year?
 |  |
| 1. Please indicate how many Black Belt Clinics your candidate has attended.
 |  |
| 1. As the instructor, do you confirm that you have completed all of the verification in this section?
 | [ ]  YES [ ]  NO |
| **INSTRUCTOR SIGNATURE** |

**USE SEPARATE SHEET TO ANSWER THE FOLLOWING TWO QUESTIONS (IF NECESSARY):**

1. **Why are you recommending this student for advancement?**
2. **What do you feel this student has to offer the SWKKF?**

**ADDITIONAL INFORMATION FOR JOSEKI BOARD:**

SWKKF – Black Belt Grading Written Questionnaire

|  |  |
| --- | --- |
| Date:  |  |
| First Name:  |  | Last Name:  |  |
| Grading Date: |  | Grading Location: |  |

Part I: Basic Terminology

Write the Japanese words for the numbers 1 through 10.

|  |  |  |  |
| --- | --- | --- | --- |
| 1 |  | 6 |  |
| 2 |  | 7 |  |
| 3 |  | 8 |  |
| 4 |  | 9 |  |
| 5 |  | 10 |  |

|  |  |  |
| --- | --- | --- |
| Write the English translation of the following Japanese Terms: |  | Write the Japanese translation for the following English terms: |
| Zenkutsu dachi |  | Strike |  |
| Tsuki |  | Kick |  |
| Ashi barai |  | Round-house kick |  |
| Empei |  | Body twisting or shifting |  |
| Mae geri |  | Turn |  |
| Uke |  | Back stance |  |
| Yame |  | Cat stance |  |
| Yoko |  | Back hand |  |
| Dojo |  | Palm heel strike |  |
| Sensei |  | Hammer fist |  |

Part II: Who’s Who?

|  |  |
| --- | --- |
| 1. | Who’s the founder of Wado Kai Karate and what rank did he hold? |
|  |
| 2. | Who was the above person’s 1st karate instructor? |
|  |
| 3. | Who is responsible for bringing Wado Kai Karate to Canada and what rank did he hold? |
|  |
| 4. | Who is the current president of the Shintani Wado Kai Karate Federation and what rank does he hold? |
|  |
| 5. | Who is the chief instructor of the Shintani Wado Kai Karate Federation and what rank does he hold? |
|  |
| 6. | We have 9 Senate members in the Shintani Wado Kai Karate Federation. Can you name them? |
| 1. |  | 6. |  |
| 2. |  | 7. |  |
| 3. |  | 8. |  |
| 4. |  | 9. |  |
| 5. |  |

**Part III: Philosophy**

1. Describe what a kata is to someone whom has no knowledge of the martial arts.

2. Explain the symbolism behind the dove and fist emblem.

3. Explain your interpretation of Sensei Shintani’s philosophy of karate.

4. Define the word “dojo” and describe what the expectations of students are in respect to that word.

5. What does it mean to be a sensei?

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| **FOR OFFICE PURPOSE ONLY** |
| **DATE RECEIVED** |  |
| **INFORMATION AND PAYMENT RECEIVED** |  |