**Candidate for appointment of Shihan**

(Based of Rules for Appointment of Shihan)

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| Name:姓名 | Photo相片 |
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| Date of Birth:生日dd / Mmm / yyyy | Nationality:國籍 |
| Address:地址 |
| Present Dan: 現有段Dan | 6th Dan registration date:dd / mm / y6段登記日期 | Aikikai Membership No.:合氣會會員證號 |
| Position in the organization, to which the candidate belongs:申請人於所屬單位之職位 |
| Candidate’s Aikido Background申請人之合氣道背景(Additional pages can be attached if space below is not enough.)下面空格不足時可另附頁-Brief history of candidate’s Aikido activity:申請人之合氣道簡歷-Period as instructor in the organization:於所屬組織擔任教練期間-Main accomplishment in the organization:於所屬組織之主要貢獻成就-Candidate’s policy and thoughts relating to instruction/practice of Aikido:申請人對於合氣道的訓練和指導之想法和原則-Other information and remarks, if any:其他有關資訊和備註(如有) |
| Name of Organization submitting this document:本件申請人所屬組織名稱 |
| Name of Person in Charge (Print here):負責人名稱(打字) |
| Signature of Person in Charge:負責人簽名 |

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