

# UNITED STATES TAEKWON-DO FEDERATION



## REFEREE CERTIFICATION APPLICATION



*Your Two Photos  
1"x1"*

(MUST BE TYPED OR PRINTED)

Date of Course: \_\_\_\_\_  Standard  Refresher      Location: \_\_\_\_\_

Applicant's Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Occupation: \_\_\_\_\_

Rank: \_\_\_\_\_ Date of Ranking: \_\_\_\_\_ Current USTF Dan #: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Zip Code: \_\_\_\_\_ Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Name of Taekwon-Do School: \_\_\_\_\_

Name of Instructor: \_\_\_\_\_ Telephone: \_\_\_\_\_

**Current Referee Status:** If you have been certified by the USTF you must check the current level of certification, date and place of certification, otherwise you will be considered as a beginner not yet certified.

Classification	Check	Date of Certification	Place of Certification
Not Certified		NA	NA
<b>USTF "C" REFEREE</b>			
<b>USTF "B" REFEREE</b>			
<b>USTF "A" REFEREE</b>			
Under 16 Years Old		NA	NA
<b>COACH</b>		NA	NA

As a member of the USTF I do hereby apply for certification as a Class \_\_\_\_\_ Referee.  
(Classification)

Date of Application: \_\_\_\_\_ Signature of Applicant: \_\_\_\_\_

*To be filled out by applicant's instructor:*

Recommended by (Print Instructor's Name): \_\_\_\_\_ Rank: \_\_\_\_\_ Signature: \_\_\_\_\_

**OFFICIAL USTF USE ONLY (DO NOT WRITE BELOW THIS LINE)**

**WRITTEN EXAM**

**PRACTICAL PERFORMANCE EXAM**

Score: \_\_\_\_\_  
 Pass  Fail

Refereeing Score: \_\_\_\_\_  
 Pass  Fail

Judging Score: \_\_\_\_\_  
 Pass  Fail

The above applicant has hereby been approved or disapproved (circle one) as a Class \_\_\_\_\_ Referee.

Effective Date: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Fee Paid: \$ \_\_\_\_\_

Examiner: \_\_\_\_\_