

# RED STRIPE

## TAEKWON-DO REQUIREMENTS

3RD GUP (RED STRIPE) test for 3RD GUP (DOUBLE RED STRIPE)

Name: (Please print First and Last)

Signature:

Age:

I hereby request to be tested for a higher rank and agree that the examiner shall be the only persons who are qualified to place me on the basis of my technique, knowledge of the art and attitude.

Date of completion:

### ATTENDANCE

Attend a minimum of 64 Advanced level classes.

<input type="checkbox"/> 1: DATE _____	<input type="checkbox"/> 17: DATE _____	<input type="checkbox"/> 33: DATE _____	<input type="checkbox"/> 49: DATE _____
<input type="checkbox"/> 2: DATE _____	<input type="checkbox"/> 18: DATE _____	<input type="checkbox"/> 34: DATE _____	<input type="checkbox"/> 50: DATE _____
<input type="checkbox"/> 3: DATE _____	<input type="checkbox"/> 19: DATE _____	<input type="checkbox"/> 35: DATE _____	<input type="checkbox"/> 51: DATE _____
<input type="checkbox"/> 4: DATE _____	<input type="checkbox"/> 20: DATE _____	<input type="checkbox"/> 36: DATE _____	<input type="checkbox"/> 52: DATE _____
<input type="checkbox"/> 5: DATE _____	<input type="checkbox"/> 21: DATE _____	<input type="checkbox"/> 37: DATE _____	<input type="checkbox"/> 53: DATE _____
<input type="checkbox"/> 6: DATE _____	<input type="checkbox"/> 22: DATE _____	<input type="checkbox"/> 38: DATE _____	<input type="checkbox"/> 54: DATE _____
<input type="checkbox"/> 7: DATE _____	<input type="checkbox"/> 23: DATE _____	<input type="checkbox"/> 39: DATE _____	<input type="checkbox"/> 55: DATE _____
<input type="checkbox"/> 8: DATE _____	<input type="checkbox"/> 24: DATE _____	<input type="checkbox"/> 40: DATE _____	<input type="checkbox"/> 56: DATE _____
<input type="checkbox"/> 9: DATE _____	<input type="checkbox"/> 25: DATE _____	<input type="checkbox"/> 41: DATE _____	<input type="checkbox"/> 57: DATE _____
<input type="checkbox"/> 10: DATE _____	<input type="checkbox"/> 26: DATE _____	<input type="checkbox"/> 42: DATE _____	<input type="checkbox"/> 58: DATE _____
<input type="checkbox"/> 11: DATE _____	<input type="checkbox"/> 27: DATE _____	<input type="checkbox"/> 43: DATE _____	<input type="checkbox"/> 59: DATE _____
<input type="checkbox"/> 12: DATE _____	<input type="checkbox"/> 28: DATE _____	<input type="checkbox"/> 44: DATE _____	<input type="checkbox"/> 60: DATE _____
<input type="checkbox"/> 13: DATE _____	<input type="checkbox"/> 29: DATE _____	<input type="checkbox"/> 45: DATE _____	<input type="checkbox"/> 61: DATE _____
<input type="checkbox"/> 14: DATE _____	<input type="checkbox"/> 30: DATE _____	<input type="checkbox"/> 46: DATE _____	<input type="checkbox"/> 62: DATE _____
<input type="checkbox"/> 15: DATE _____	<input type="checkbox"/> 31: DATE _____	<input type="checkbox"/> 47: DATE _____	<input type="checkbox"/> 63: DATE _____
<input type="checkbox"/> 16: DATE _____	<input type="checkbox"/> 32: DATE _____	<input type="checkbox"/> 48: DATE _____	<input type="checkbox"/> 64: DATE _____

In addition to the above classes, the student must be able to demonstrate the following items with precision, balance and power. (Each section and attendance must be signed by an assistant instructor or instructor where appropriate.)

### CITIZENSHIP (Social & Academic)

On going demonstration of good discipline:  
COURTESY, INTEGRITY, PERSEVERANCE, SELF-CONTROL, INDOMITABLE SPIRIT

At home, school, and public (Including grade point average)

<input type="checkbox"/> COMPLETE	Parent's Name: (If the student is under the age of 18):
_____	Parent's Signature:
DATE:	

In Studio

<input type="checkbox"/> COMPLETE	Examiner's Name (Print Name):
_____	Examiner's Signature:
DATE:	

## ▶ STANCES

- No new stances

<input type="checkbox"/> <b>COMPLETE</b>  _____ DATE:	Examiner's Name (Print Name):
	Examiner's Signature:

## ▶ HAND TECHNIQUES

- Upset thrust with the flat fingertip
- Side back strike with the back fist
- Pressing block with the x-fist
- Side thrust with the twin elbow
- W-shape block with the outer forearm
- Pushing block with the double forearm
- Front thrust with the flat fingertip

<input type="checkbox"/> <b>COMPLETE</b>  _____ DATE:	Examiner's Name (Print Name):
	Examiner's Signature:

## ▶ CONDITIONING

- Finger Tip Push-ups (10)
- Jumping Shuffle Push-ups (15)
- Drive Bombers (15)
- One Legged Squat (3)
- Headstand Leg Extenders (10)
- Sit-up Knee up's (20)
- Pendulum (20)
- Stretching - Side & Front Splits, Feet together

<input type="checkbox"/> <b>COMPLETE</b>  _____ DATE:	Examiner's Name (Print Name):
	Examiner's Signature:

## ▶ KICKING

- Back Snap Kick
- Outward pressing Kick
- Inward Pressing Kick
- Skip Kicks
- Three Consecutive Kicks - different directions

<input type="checkbox"/> <b>COMPLETE</b>  _____ DATE:	Examiner's Name (Print Name):
	Examiner's Signature:

## ▶ BREAKING

Children (Ages 13 and under)

- 1/2 Board Triple Kicking - multiple targets
- 1/2 Board Downward Knifehand strike

Women & Juniors (Juniors age 13 to 17)

- 1/2 Board Triple Kicking - multiple targets
- 1/2 Board Downward Knifehand strike

Men (Ages 18 and above)

- 1 Board Triple Kicking - multiple targets
- 1/2 Board Back Fist side strike

<input type="checkbox"/> <b>COMPLETE</b>  _____ DATE:	Examiner's Name (Print Name):
	Examiner's Signature:

## ▶ PATTERN

- Toi-Gye

<input type="checkbox"/> <b>COMPLETE</b>  _____ DATE:	Examiner's Name (Print Name):
	Examiner's Signature:

## ▶ REQUIRED KNOWLEDGE

- Counting to 80 in Korean (YODUN)
- Toi-Gye pattern Interpretation
- The meaning of Red Belt
- Nine points to be observed while performing a pattern

<input type="checkbox"/> <b>COMPLETE</b>  _____ DATE:	Examiner's Name (Print Name):
	Examiner's Signature: