

Shinsa Application Form

(For Shogo/Rokudan and Above)

To the President of the All Nippon Kyudo Federation

						Date:	
Name	Last Name		First Name		M F	Date of Birth	Year/Month/Day
	(in Japanese)						Age on Day of Shinsa:
Address							
Shinsa Category	Shi	Present Dan Rank	Dan		Date Obtained (Year/Month/Day)		
		Name of Shinsa:					
	Dan	Present Shogo Title	Shi		Date Obtained (Year/Month/Day)		
		Name of Shinsa:					
Kyudo Career				ANKF/IKYF Seminar Attendance Record		ANKF/IKYF Taikai Accomplishments	
Year	Month	Details		Year	Month	Details	
		Began Kyudo with					
		()					
Current Affiliation		()		Instructor Career			Positions Held (International, National or Local)
Current Instructor		()		Year	Month	Details	
Dates of Promotions (Year/Month/Day)							
Shodan		Godan					
Nidan		Rokudan					
Sandan		Renshi					
Yondan							
Signature of Applicant							
I approve the above applicant's Shinsa Application							
Name of National Federation / Association				Signature of National President			

- Notes
- Application form should be handwritten.
 - In the case of false information, the application will be made invalid.
 - Copied application forms will not be accepted.
 - Applicants should write within the heavy-lined areas only

Shinsa Category	
Name of Shinsa	
Date	(Year/Month/Day)
Venue	
Remarks (Rissha or other pertinent information)	
(fill-in with red ink)	
Name	
ID No.	

No. ()