UNITED STATES JU-JITSU FEDERATION

*The National Governing Body for Ju-Jitsu / Jiu-Jitsu in the United States of America*

USJJF National Office: 3816 Bellingham Drive - Reno, Nevada 89511 USA

Website: www.usjjf.org, Email: natlhq.usjjf@gmail.com

# *REQUEST FOR VALIDATION OF “USA JIU-JITSU” RANK*

## Information

1. Use this form to validate the Jiu-Jitsu Rank of a new or prospective member who presently does not have acceptable rank credentials, and although may be technically valid, has no rank card or certificate from a recognized organization as defined by the National Technical Committee of the USJJF.
2. This from is to be submitted with a USJJF Membership Application (using On-Line Registration) for all applicants who are not presently members of the United States Ju-Jitsu Federation.
3. All entries must be typed or printed clearly. Every section must be completed or the words “not applicable” or “unknown” entered. Forms not properly completed will be returned to recommending official for correction.
4. Fees for validation are as follows: $25.00 for all below Black Belt ranks, and $150 for Black Belt, and increasing by $25 increments per Degree. (i.e. 1st Degree, $175.00; 2nd Degree, $200.00; etc)
5. All recommending officials must be a Certified Instructor / Examiner and a current member of the USJJF.
6. All recommendations for validation to a below Black belt grade must be signed by a USJJF Black Belt. If the validation is for a Black Belt Degree rank, then the validation must be signed by a USJJF Black Belt at least two ranks higher than that of the applicant.
7. Photo copies of the applicants Jiu-Jitsu rank certification (if any), a typewritten or clearly printed biography, and photo, should be attached and submitted with this request.
8. Please make all checks or money orders payable to the USJJF and mail to the USJJF National Headquarters at the above address.

## Applicant Information

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| Name: |  | Date: |  |
| Address: |  | | |

(Street and Number) (City and State) (Zip Code)

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| Birth Date: | |  | | Age: |  |  | | | |  | |  | |  | | |
| Work Phone: | |  | | | | | | Home Phone: | | | |  | | | | |
| Fax: |  | | | | | | | E-Mail: | | |  | | | | | |
| Club Name: | | |  | | | | Sensei’s Name: | | | | | |  | | | |
| Club Address: | | |  | | | | | | | | | | | | | |
| Jiu-Jitsu: *(circle one & specify*  *Jiu-Jitsu System)* | | |  | | | | | | | | | | Age Began Studying: | | |  |
| Current Rank | | |  | | Rank Date: | | | |  | | | Time in Grade: | | |  | |

### Recommendation for Validation

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| Recommended for (Rank): | |  | | Recommended Rank Date |  |
| Jiu-Jitsu Style: | |  | | | |
| This Validation is for: | | | | | |
|  | Existing Jiu-Jitsu Rank without Credentials | | | | |
|  | Best Qualified Jiu-Jitsu Rank | | | | |
|  | Other (Explain) | |  | | |
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### Jiu-Jitsu Activity Record

(Complete since starting Jiu-Jitsu study or last rank credential)

1. Explain: Time, Location, and Consistency of Applicants Training

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(Use additional sheet if needed)

1. If for higher grade. Explain: Time, Location and Consistency of Applicants Teaching

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(Use additional sheet if needed)

1. Explain the “Specific Elements” of the system of Jiu-Jitsu that the applicant has studied. (i.e. Grappling, Training, Teaching, Competition, Self-Defense, etc.)

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(Use additional sheet if needed)

1. Number of clinics (or institutes) or competition events hosted / conducted

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| Local Events |  |
| National Events |  |

1. Number of camps hosted / conducted

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| --- | --- |
| Local Events |  |
| National Events |  |

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| 1. Time served as Head Instructor |  |

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| 1. Time served as an Assistant Instructor |  |

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| 1. Number of clinics or camps attended |  |

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| 1. Any special certification(s)? (i.e. Referee, Instructor, etc) |  |
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| 1. Other significant Jiu-Jitsu activity |  |
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### Jiu-Jitsu Rank History

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| **Rank** | **Rank Date** | **Given Certificate** | | **Instructor** | **Organization** |
| **Yes** | | | **No** | | |
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### Special Achievements

Provide a narrative of all special achievements such as competition, teaching, tournament officiating, staff work, public relations, demonstrations, hosting clinics or camps, writing publications, etc, (use additional sheet of needed)

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### Certification and Recommendation

I certify that the information contained herein is accurate to the best of my knowledge. I have been examined or have presented my Rank Credentials and do accept the Jiu-Jitsu Rank recommended for me with the USJJF.

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| Signature of applicant and date | |
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| Validation Fee Enclosed |  |

I have examined the applicant or have received and reviewed his/her Rank Credentials (also Jiu-Jitsu Activity & Achievement Record). I find the applicant fully qualified and recommend this rank validation.

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| Signature of Certified Instructor / Examiner |
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| Printed name, rank & membership number of USJJF Certified Instructor / Examiner |

### Additional Endorsements

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| Comments by Additional Endorsing Official |  |
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| Signature of additional endorsing officials |
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| Printed name, rank, and membership number of official |

### USJJF National Office Processing

Please send USJJF credentials to (circle one): Instructor/Examiner | Applicant

Reserved for USJJF National Headquarters

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#### Please note that the USJJF does not ship bulk forms