



Nippon Budō Seishin-Kan

Character Reference and Recommendation

Applicant's Name: _____ Age: _____

I, _____, **do hereby attest and certify the following statements to be true and correct to the best of my knowledge and belief** regarding the above-named Applicant for membership in the Nippon Budō Seishin-Kan (commonly known as the “Seishin-Kan”):

- I have been engaged in the profession(s) indicated by an “X” or “✓” below for approximately _____ years, by reason of which I am trained and experienced in judging the character and actions of people:
 - ___ Minister, Priest, Rabbi, Imam, or other clergy
 - ___ Law enforcement, probation, or parole officer
 - ___ Military officer or NCO, business or non-profit manager, human resources professional, or similar managerial or leadership profession
 - ___ Lawyer, judge, or other officer of the courts
 - ___ Psychiatrist, Psychologist, or other counseling professional
 - ___ Teacher, guidance counselor, principal, or other educational professional
 - ___ *Yūdansha* (black belt) member of (*dōjō*) _____
 - ___ Other (specify): _____
- I have known the Applicant for approximately _____ years, during which time I have personally observed and evaluated the Applicant's behavior, attitudes, demeanor, and moral character.
- I have been informed and understand that Applicant has applied for permission to engage in martial arts training at the Nippon Budō Seishin-Kan, and that this training specifically involves instruction in techniques for inflicting severe injury, dismemberment, and death, as well as defending against such techniques under realistic conditions.
- I personally know Applicant to be a person of upstanding moral character and good judgment who can be entrusted with knowledge and training in the use of lethal force and deadly weapons, and one who would not misuse that knowledge or training to purposely harm others. Accordingly, I personally recommend Applicant to receive such knowledge and training.
- I understand that the Nippon Budō Seishin-Kan will rely upon this recommendation (among other factors) in its decision to accept Applicant for martial arts training, and I therefore affirm that I have not knowingly made any false or misleading statement herein.**

Signed: _____ Date: _____

Printed Name: _____ Phone: _____

Contact Address: _____

City: _____ State: _____ Zip: _____