

DeJohnette Martial Arts Academy



“Break My Bad Habit”

(RETURN COMPLETED FORM BEFORE DEADLINE)

Student’s Name: _____
(Type or Print clearly)

My “bad habit” is _____

To **break** my bad habit I promise that for the next thirty days I will:

1. _____

2. _____

3. _____

Signed: _____ Date: _____
(Student’s signature)

Return the completed form to Master DeJohnette no later than: 1 WK BEFORE TEST.

(NOTE: This form will be returned to Student AFTER the Shim Sa for Parent’s 30-day confirmation)

Student must complete the above **THREE** tasks during the next thirty days to demonstrate their desire to break the **bad habit**. After thirty days parent or guardian can confirm all **THREE** tasks were completed successfully by signing below.

Parent’s Confirmation: _____

