

Abacus Dictation/Mental Dictation Online Certification

August 20, 2020



League for Soroban Edu. of America
1740 Cabrillo St. West Covina, Ca. 91791

We will have the above certification program on ZOOM starting in September as follows.

1. Test date & Time : December 5, 2020 (Saturday) at 7:30pm (PST)
2. Testing Level: 1- 4 kyu & Dan 1-10
3. Fee: Fee will be paid in advance and non refundable.
Yet you can postpone into the next quarter. This procedure has to notified to the League before 1st time lesson.

League's students	Test + 5 practices	\$60
Non-League students	Same as above	\$75

- Extra Practices (2 times a week) \$40 (League students), \$55 (Non League students)

4. Payment (Deadline: Sep 10, 2020)
 - PAYPAL @leagueforsoroban
 - Check : Payable to League for Soroban Edu. of America (Mail to the League or hand it in to your teacher)

5. Practice Class(Group)

Class	Abacus	Mental	Qualification to participate
A	4-1 kyu	4-1 kyu	Abacus 3 kyu or above(recommended)
B	1-3 dan	1-3 dan	Abacus 1 dan
C	4dan or above	4 dan or above	Abacus 4 dan

6. Practice Class Schedule

Class	Day & Time	Date
A	Tuesday 3:15-3:45pm	Sep 15 & 29, Oct 13, Nov 3 & 17
	Saturday 7:30-8:00pm	Sep 19, Oct 3 & 17, Nov 7 & 21
B	Friday 6:15-6:45pm	Sep 18, Oct 2 & 16, Nov 6 & 17
	Saturday 7:30-8:00pm	Sep 19, Oct 3 & 17, Nov 7 & 21
C	Saturday 7:30-8:00pm	Sep 19, Oct 3 & 17, Nov 7 & 21

- NO make-up class
- Every class will send out a video to all participants that missed class or wants more practice.

7. How to administer:

- a. Each class has max. limit: 25 students. 2 instructors : a reader & a proctor
- b. 12 min. for mental dict. ; 18 min. for abacus (rough schedule)
- c. Using Abacutor (Free APP) to put answers at test session
Required to have Tablets, iPad or Android

8. Deadline: Sep.10th, 2020

If you are interested in this certification program, please turn in this form to your school.

- If paid in by Paypal, please still turn in this form to your school.
- Your teacher has to have recommended your participation levels.
- Please ask your teacher sample levels on each dictation.

- - - - - Cut-Off Line - - - - -

Dictations Online certification Program

I want to take Dictation certification Program given by the League
Spell out clearly.

Student Name : _____

School Grade: _____ th

Abacus School Name: _____

Email address: _____

Levels you want to join:

- Abacus _____ kyu / dan

Tue / Fri / Sat (Circle you attend)

- Mental _____ kyu / dan

Tue / Fri / Sat (Circle you attend)

Your current acquired levels:(abacus) _____ kyu / Dan; (mental) _____ kyu / Dan

Fee(s): \$ _____

- I paid by Paypal () Parent's Initial: _____
- I paid by check () Date sent: _____ / _____ / _____

Parent Signature: _____ Date: _____