

NAME: \_\_\_\_\_

CLAN: \_\_\_\_\_ SCHOOL: \_\_\_\_\_

RANK: \_\_\_\_\_ INSIGHT: \_\_\_\_\_

(RINGS X 10) + SKILLS + INSIGHT BONUSES



VOID POINTS SPENT

**PRIMARY WEAPON**

ROLL TO ATTACK (TRAIT/WEAPON SKILL)	_____
DR	_____
QUALITY	_____
SPECIAL ABILITIES	_____

**ARMOR**

TN BONUS	_____	QUALITY	_____
SPECIAL ABILITIES _____			

**TN TO BE HIT**

TN TO BE HIT =	_____
REFLEXES X 5 + ARMOR + OTHER MODIFIERS	
OTHER MODIFIERS	_____

**INITIATIVE**

ROLL REFLEXES/SCHOOL RANK	_____
CURRENT INITIATIVE	_____

**WOUNDS** (EARTH X 2 PER LEVEL, EARTH X 5 FOR OUT)

WOUND LEVEL	TOTAL	CURRENT
HEALTHY (+0)		
NICKED (+3)		
GRAZED (+5)		
HURT (+10)		
INJURED (+15)		
CRIPPLED (+20)		
DOWN (+40) <small>MUST SPEND VOID TO ACT</small>		
OUT <small>CANNOT ACT</small>		

**SKILLS**

SKILL NAME	EMPHASES	RANKS	SCHOOL SKILL
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>
_____	_____	_____	<input type="checkbox"/>

**MASTERY ABILITIES**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

GLORY: \_\_\_\_\_

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

HONOR: \_\_\_\_\_

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

STATUS: \_\_\_\_\_

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SHADOWLANDS TAIN: \_\_\_\_\_

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

EXPERIENCE POINTS \_\_\_\_\_

