Al Udeid Air Base Education Center DSN 318-437-0071 al_udeidbtes@auab.afcent.af.mil



DLAB –Defense Language Aptitude Battery

		Applican	t Information		
Full Name:	Last	First	M.I.	Date:	
	Last	7 1100	Will		
Assigned Ba	se:				
Owning MPS	G (AF)/Personnel Office (USA/USN	I/USMC):			
Military Emai	il:		Civilian Email		
Social Secur					
	ervice:		- A (; B)	☐ Guard	Reserves
Have you tak	ken the DLAB previously?	YES NO			
How many ti	mes have you taken the DLAB?		If yes, when?		
Location tha	t you took previous test at:				,
Reason why	the test is needed:				
		Disclaimer	and Signature		
Initial the fo	ollowing statements:				
I certify	that my answers are true and c	omplete to the	best of my knowledge.		
I under	stand that false or misleading in	formation may	lead to punishment under UCN	1J.	
I unde	rstand I am only allowed to take	the 2 times in	my career.		
I unde	rstand that only the most recent	DLAB scores	will be reflected in the system.		
Signature:				Date:	
Date test adr	ministered:				