FOREIGN LANGUAGE OPI REQUEST

EXAMINEE INFORMATION

NAME OF CANDIDATE (Last, First, MI):	
HOW DID YOU LEARN THE LANGUAGE? (HOME	ENVIRONMENT/SCHOOL)
SOCIAL SECURITY NUMBER:	
DOD ID NUMBER:	
BRANCH OF SERVICE:	_ (Active Duty/Guard/Reserve)
SPECIAL OPERATIONS FORCES: (Yes/No)	
REQUESTED LANGUAGE:	
LAST DLPT DATE ON THIS LANGUAGE:	LISTENING SCORE READING SCORE
LAST SPEAKING TEST DATE ON THIS LANGUAGE	::
ARE YOU A LINGUIST: (Yes/No) IF YES, CONTROL/PRIMARY LANGUAGE:	
IN A LANGUAGE CODED BILLET: (Yes/No) IF YES, CONTROL/PRIMARY LANGUAGE:	
IS THIS YOUR FIRST TIME TESTING REQUESTED LANGUAGE: (Yes/No)	
EXPIRATION DATE OF FLPP ENTITLEMENT: LAST OPI TAKEN:	
JUSTIFICATION FOR REQUESTING TEST: FLPB OTHERLEAP	
REMARKS (FULLY EXPLAIN):	
TEST SITE INFORMATION	
TEST SITE ID NUMBER: <u>1007</u>	
TEST SITE LOCATION: <u>AL UDEID AB, QATAR</u>	
EMAIL: Al_Udeidbtes@auab.afcent.af.mil COMMERCIAL PHONE OF TCO: (011) 974-4458	-9555 ext 455-6542 DSN: <u>318-455-6542</u>
ALERNATE NUMBER THAT THE OPI CAN BE CO	NDUCTED ON: (011) 974-4458-9555 ext 455-6546
NAME OF TCO:	

NOTE: The above phone number must be under the control and supervision of the installation testing personnel; and must not be in the examinee's living quarters, unit, or workplace. DO NOT USE a cell phone. All requests must be submitted to DLI, through the approved Services Personnel Testing Manager. Test will be cancelled if no confirmation is received at least 24 hours prior to test date.