

**1. NAME:** Print your name as you entered it in the first 21 boxes on your admission form. Using one box for each letter, first print your family name (surname), then your first (given) name, and then your middle name. Leave one box blank between names. Then, below each box, use a No. 2 (H.B.) pencil and fill in the circle containing the same letter.

A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A	A
B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B	B
C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C	C
D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D	D
E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E	E
F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F	F
G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G	G
H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H	H
I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I	I
J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J	J
K	K	K	K	K	K	K	K	K	K	K	K	K	K	K	K	K	K	K	K	K	K
L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L
M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M	M
N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N	N
O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O	O
P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P	P
Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q	Q
R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R	R
S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S	S
T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T
U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U	U
V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V	V
W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W	W
X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X	X
Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z	Z

2. STUDENT NUMBER (If assigned)												3. DATE OF BIRTH			4. NATIVE COUNTRY	5. NATIVE LANGUAGE
Start here												MO.	DAY	YEAR	CODE	CODE
0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9	9

6. SEX	7. LEVEL 2 (PRE-TOEFL)	8. PLACE OF TESTING NAME OF SCHOOL/INSTITUTION
MALE <input type="radio"/>	LEVEL 1 (TOEFL-ITP) <input type="radio"/>	
FEMALE <input type="radio"/>		

9. BACKGROUND QUESTIONNAIRE RESPONSES				
	1	2	3	4
	A	A	A	A
	B	B	B	B
	C	C	C	C
	D	D	D	D
	E	E	E	E
	F	F	F	F
	G	G	G	G

**10. SIGNATURE AND DATE:** Please copy the following statement in the space provided below; use handwriting.

"I hereby affirm that I am the person whose name is given on this answer sheet."

Also sign your name on the line provided, and enter today's date (in numbers).

DATE: \_\_\_\_\_ MO. \_\_\_\_\_ DAY \_\_\_\_\_ YEAR \_\_\_\_\_

SIGNED: \_\_\_\_\_  
(WRITE YOUR NAME AS IF SIGNING A BUSINESS LETTER.)

TEST BOOK NUMBER		TEST FORM		Be sure to fill in completely the circle that corresponds to your answer choice. Completely erase errors or stray marks. You may find more answer spaces than you need. If so, leave them blank.		EXAMPLE				
						CORRECT	INCORRECT	INCORRECT	INCORRECT	INCORRECT
						A B <input checked="" type="radio"/> D	A B <input checked="" type="radio"/> D	A B <input checked="" type="radio"/> D	A B <input checked="" type="radio"/> D	A B <input checked="" type="radio"/> D

SECTION 1										SECTION 2										SECTION 3																								
1	A	B	C	D	21	A	B	C	D	41	A	B	C	D	1	A	B	C	D	21	A	B	C	D	41	A	B	C	D	1	A	B	C	D	21	A	B	C	D	41	A	B	C	D
2	A	B	C	D	22	A	B	C	D	42	A	B	C	D	2	A	B	C	D	22	A	B	C	D	42	A	B	C	D	2	A	B	C	D	22	A	B	C	D	42	A	B	C	D
3	A	B	C	D	23	A	B	C	D	43	A	B	C	D	3	A	B	C	D	23	A	B	C	D	43	A	B	C	D	3	A	B	C	D	23	A	B	C	D	43	A	B	C	D
4	A	B	C	D	24	A	B	C	D	44	A	B	C	D	4	A	B	C	D	24	A	B	C	D	44	A	B	C	D	4	A	B	C	D	24	A	B	C	D	44	A	B	C	D
5	A	B	C	D	25	A	B	C	D	45	A	B	C	D	5	A	B	C	D	25	A	B	C	D	45	A	B	C	D	5	A	B	C	D	25	A	B	C	D	45	A	B	C	D
6	A	B	C	D	26	A	B	C	D	46	A	B	C	D	6	A	B	C	D	26	A	B	C	D	46	A	B	C	D	6	A	B	C	D	26	A	B	C	D	46	A	B	C	D
7	A	B	C	D	27	A	B	C	D	47	A	B	C	D	7	A	B	C	D	27	A	B	C	D	47	A	B	C	D	7	A	B	C	D	27	A	B	C	D	47	A	B	C	D
8	A	B	C	D	28	A	B	C	D	48	A	B	C	D	8	A	B	C	D	28	A	B	C	D	48	A	B	C	D	8	A	B	C	D	28	A	B	C	D	48	A	B	C	D
9	A	B	C	D	29	A	B	C	D	49	A	B	C	D	9	A	B	C	D	29	A	B	C	D	49	A	B	C	D	9	A	B	C	D	29	A	B	C	D	49	A	B	C	D
10	A	B	C	D	30	A	B	C	D	50	A	B	C	D	10	A	B	C	D	30	A	B	C	D	50	A	B	C	D	10	A	B	C	D	30	A	B	C	D	50	A	B	C	D
11	A	B	C	D	31	A	B	C	D					11	A	B	C	D	31	A	B	C	D					11	A	B	C	D	31	A	B	C	D							
12	A	B	C	D	32	A	B	C	D					12	A	B	C	D	32	A	B	C	D					12	A	B	C	D	32	A	B	C	D							
13	A	B	C	D	33	A	B	C	D					13	A	B	C	D	33	A	B	C	D					13	A	B	C	D	33	A	B	C	D							
14	A	B	C	D	34	A	B	C	D					14	A	B	C	D	34	A	B	C	D					14	A	B	C	D	34	A	B	C	D							
15	A	B	C	D	35	A	B	C	D					15	A	B	C	D	35	A	B	C	D					15	A	B	C	D	35	A	B	C	D							
16	A	B	C	D	36	A	B	C	D					16	A	B	C	D	36	A	B	C	D					16	A	B	C	D	36	A	B	C	D							
17	A	B	C	D	37	A	B	C	D					17	A	B	C	D	37	A	B	C	D					17	A	B	C	D	37	A	B	C	D							
18	A	B	C	D	38	A	B	C	D					18	A	B	C	D	38	A	B	C	D					18	A	B	C	D	38	A	B	C	D							
19	A	B	C	D	39	A	B	C	D					19	A	B	C	D	39	A	B	C	D					19	A	B	C	D	39	A	B	C	D							
20	A	B	C	D	40	A	B	C	D					20	A	B	C	D	40	A	B	C	D					20	A	B	C	D	40	A	B	C	D							