

# STANDARD OPI Request

Administered at Camp Humphreys Education Center, South Korea via Phone

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ MI: \_\_\_ Rank: \_\_\_\_\_  
Official Email Address: \_\_\_\_\_ DOD ID # \_\_\_\_\_  
Personal Email: \_\_\_\_\_  
Phone Number: \_\_\_\_\_  
Unit Commander's Name: \_\_\_\_\_  
Unit Commander's Phone Number: \_\_\_\_\_  
Unit Commander's Email: \_\_\_\_\_  
Name of First O5 in Chain-of-Command (for No Show Report): \_\_\_\_\_

Language Test Requesting: \_\_\_\_\_ Reason for Test: \_\_\_\_\_  
How did you acquire this language? \_\_\_\_\_  
Are you Special Forces? Yes No

## Dates of Availability

Please list three dates (excluding Thursdays, Weekends, and Holidays) that you are available to test. Or a 2-4 week date range that you would be available between the hours of 0800 - 1500 to test. **The dates requested must be at least fifteen days out from when the Education Center receives this form to be valid.**

Dates Requested (3): \_\_\_\_\_

Scheduled DLPT Date(s): \_\_\_\_\_

## AGREEMENT

I have been informed that OPI tests are very costly. If I fail to show up for the scheduled test, it results in a significant waste of government funds.

After submitting my DA 4187 or Civilian Memo, I will check my email daily to receive notification of my test appointment. Upon notification of my appointment date and time by email, I will confirm or cancel my test date and time within 48 hours to Camp Humphreys Education Center Testing. If I do not confirm that I have been informed of the test date 48 hours prior to the date of testing, I agree to have my test date canceled.

If I have to cancel a test appointment, I will notify the Education Center 48 hours prior to the test date to give the testing personnel time to cancel the test with DLI.

Any cancellation and/or no show requires a memo from the first O5 in my Chain-of-Command requesting a new test date and ensuring my attendance at the next scheduled appointment.

Examinee's Signature: \_\_\_\_\_ Commander's Signature: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_