

Student Code

Last Name

First Name

Father's Name

Birthdate

Center Code Center Name

Building of the examination

Room of the examination

Time of the examination

Do Not Write In This Area

CENTER NO.	CODE NUMBER								
0	0	0	0	0	0	0	0	0	0
1	1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2	2
3	3	3	3	3	3	3	3	3	3
4	4	4	4	4	4	4	4	4	4
5	5	5	5	5	5	5	5	5	5
6	6	6	6	6	6	6	6	6	6
7	7	7	7	7	7	7	7	7	7
8	8	8	8	8	8	8	8	8	8
9	9	9	9	9	9	9	9	9	9

FULL NAME (PRINT)

LAST NAME

FIRST NAME

M.I.

YOUR SIGNATURE

TEST CENTER

Center Name

Center Code

NATIVE LANGUAGE

Do Not Write In This Area

TODAY'S DATE

Examination's Date

EXAMPLES

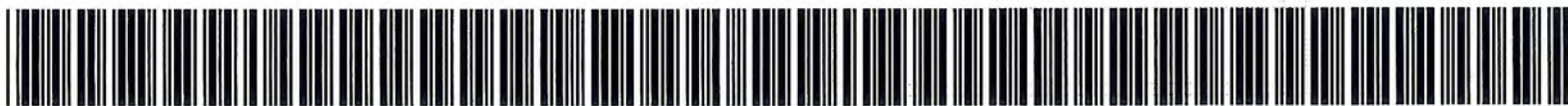
- WRONG
1
- WRONG
2
- WRONG
3
- RIGHT
4

IMPORTANT DIRECTIONS FOR MARKING ANSWERS

- Use a #2 (soft) pencil only.
- Do NOT use ink or ballpoint pens.
- Make heavy black marks that fill the circle completely.
- Erase cleanly any answer you wish to change.
- Make no stray marks on the answer sheet.
- Do not fold or crease the answer sheet.
- The examiner will tell you how to grid in the identification section.

LISTENING

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



BARCODE

GVR

51 A B C D
 52 A B C D
 53 A B C D
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DO NOT
WRITE
IN THIS
AREA