OPI Request

(All Fields Mandatory)

Reset Form

International Military Student Information

Name:_____,_____ MASL: _____
Last First

Rank:_____Country:_____ MASL Requirements: ECL_____ OPI _____

Mil. ID:_____***OR*** WCN:_____ Current/Latest ECL: Score_____ Date _____

Sponsor Service: Army ☐ Air Force ☐ Navy ☐ Previous OPI: Score_____ Date _____

For office use only: Confirm: 1) MASL ECL requirement _____ 2) 105-day validity period _____ 3) time difference _____

US Student Information

Name:_____, _____ Current/Latest ECL: Score_____ Date _____
Last First

Rank:_____ Previous OPI: Score_____ Date _____

Sponsor Service: Army ☐ Air Force ☐ Navy ☐ ROTC Contracting ☐ Commission ☐

(*09L ONLY*) Target (NATIVE) language OPI score: _____ Language Requirements: ECL_____OPI _____

Point of Contact/Test Administrator Information

POC Name:_____Telephone:_____Email: _____

Test Proctor name:_____Telephone:_____Email: _____

**Country Code required if outside the US*

Location of Test

City: _____ State (US):_____ Country: _____

Requested Date/Time of OPI Interview

Interviews normally scheduled M-TH: 0730, 0900, 1030, 1300; Fr: 0730, 0900, 1030 San Antonio (*US Central*) time

Local time			**San Antonio time**		
Day of week	Date	Time	Day of week	Date	Time

Extenuating Circumstances/Notes: