



Test Appointment Request Form

Today's date: _____

Examinee's name: _____

Military branch: _____

Military status: _____

Military rank: _____

Preferred phone: _____

Alternate phone: _____

E-mail: _____

Name of test: _____

(DLPT, DLAB, TABE, etc.)

If DLPT, specify language: _____

Test session date: _____

Test session time: _____

Is this a retest? _____

If yes, when did you take this test last? _____

Fort Meade Army Education Center

Education Services Division
ATTN: IMNE-FGGM-HRE
8601 Zimborski Avenue
Fort Meade, MD 20755

Phone: (301) 677-6421

Fax: (301) 677-4135

TESTS WE OFFER:

- TABE
- Pre-GT
- AFAST (Requires DA4187 and ERB/ORB)
- AFCT (Requires DA4187 and ERB/ORB)
- DLAB (Requires DA4187 and ERB/ORB)
- DLPT (Requires DA4187 and ERB/ORB)
- Praxis ***
- ACT and SAT

Any questions: _____

***** NOTE:** The Praxis exams must be ordered in advance and are only administered on National Test dates. Prospective Examinees are required to register for these exams at least 30 days prior to the scheduled National Test dates.