

Michigan Language Assessment

MET

REGISTRATION FORM

To be filled out by the test center and returned with completed test papers.

Registration #
Center No. Individual Registration No.

ID/Passport # _____

Issuing Country _____

Application Date _____

Incomplete forms will not be accepted, test papers will not be scored, and refunds will not be given.

Print test taker's name **exactly** as it should appear on the report.
The test taker's name must be confirmed by official identification. Use all capital letters:

Given/First Name _____ Middle Name(s) _____ Family/Last/Surname(s) _____

ADDRESS: _____
Street and Number _____ City _____ State/Province _____ Zip/Postal Code _____

Country _____ Telephone 1 _____ Email _____

GENDER: Male Female BIRTHDATE: _____
Month/Day/Year

DATE OF EXAM: _____

NATIVE LANGUAGE: (See language codes list) OCCUPATION: _____

What is your main purpose for obtaining this score report?
(check the one most important to you)

- Education Program Admissions
- Language Course Requirement
- Scholarship
- Obtain Employment
- Improve Employment
- Personal Interest
- Other

Please choose testing option:

- 2 Skills (Listening & Reading)
- 4 Skills (Listening, Reading, Speaking, and Writing)

Who has requested this exam?

I certify that the name above is correct in all respects and exactly as I wish it to appear on the report. I understand that this examination contains copyrighted materials, and I promise not to reproduce, distribute, or reveal its contents, or receive aid during the examination. I understand that Michigan Language Assessment reserves the right to invalidate my test score due to confirmed or suspected rules violations or irregularities. I also know that I can only take the MET once per month. I give my permission to Michigan Language Assessment to use my test papers and to record my speaking test for quality control, research, and training purposes. I understand that my name will not be revealed. If I have any test security concerns, I will report them to info@michiganassessment.org

Signature of Examinee: _____