Answer Sheet

ETS® TOEFL® Primary™

EXAMPLE

YES	NO	NO	NO	NO
A B ●	A B ✓	A B ✗	A ● C	A B C

Print your name in your first language:	Test Center Name:	Form Code:
	Test Date:	SCHOOL USE ONLY Is Consent Form on file? ◯ Yes ◯ No

1. NAME: Print your name. Using one box for each letter, first print your Given (first) name, then your Family (last) name. Below each box, use a No. 2 pencil and fill in the circle matching the same letter.

GIVEN (FIRST) NAME | FAMILY (LAST) NAME

2. STUDENT NUMBER Start here

3. DATE OF BIRTH

Month: Jan, Feb, Mar, Apr, May, Jun, Jul, Aug, Sep, Oct, Nov, Dec

Day: 0 1 2 3 4 5 6 7 8 9

Year: 0 1 2 3 4 5 6 7 8 9

4. GENDER

BOY ◯

GIRL ◯

5. COUNTRY CODE

6. LANGUAGE CODE

7. At my school, I am in:

- ◯ Grade 1
- ◯ Grade 2
- ◯ Grade 3
- ◯ Grade 4
- ◯ Grade 5
- ◯ Grade 6
- ◯ Grade 7
- ◯ Grade 8
- ◯ Grade 9
- ◯ Other

8. I have studied English for:

- ◯ 1 year or less
- ◯ 2 years
- ◯ 3 years
- ◯ 4 years
- ◯ 5 years
- ◯ 6 years or more

9. What test(s) have you taken before?

- ◯ TOEFL Primary Step 1
- ◯ TOEFL Primary Step 2
- ◯ Both
- ◯ None

10. GROUP CODE (if assigned)

11. CODE SETS (if assigned)

CODE SET 1 | CODE SET 2 | CODE SET 3

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