

ASSESSMENT SCORES RELEASE FORM

| Name: | | | | | |
|-------|------|--------------|----|--|--|
| | Last | First | MI | | |
| SSN: | | Date Tested: | | | |

The form can be faxed to Admissions at (864) 900-9789, emailed to admissions@sccsc.edu, or brought in person to the Admissions Center. You must provide a copy of a state-issued ID (such as a driver's license) before the test scores will be released. Scores will be sent no more than one business day after the form and ID are received.

Please check one of the following:

| Will Pick Up on this Date | e: | |
|-------------------------------|----|------|
| Mail Scores to: | | |
| | | |
| | | |
| Fax Scores to: | | |

I hereby give permission for the Admissions Office at Spartanburg Community College to release a copy of my Assessment Scores to the above named person, business or institution.

Signature: _____

Date: _____

Office Use Only
Date Mailed: _____
Date Faxed: _____
Date Picked Up: _____
By (Initials): _____