

PERMISSION FOR RELEASE OF PLACEMENT TEST SCORES

I request that my Test scores be sent to address.	at the following
ATT:	-
Please indicate test: (ASSET, COM	IPASS, or OTHER).
Print clearly all information	
Student Name:	
Social Security Number:	
Address:	
Phone#	
Name of School test was taken:	
Approximate month/year when Placemen	t Test was taken:
Student Signature	Date
OFF	ICE USE ONLY
Date Student Received	Date Mailed
RCC Official	Date