



Test Score Release Form

Students who would like to have Texas A&M University-Texarkana retrieve or send their test score(s) from/to another institution, organization or agency must complete this form. After completing this form it must be submitted to the Testing Center. Please allow the Testing Center 24-hours to retrieve scores.

Student's Information

Student's Name: _____
CWID: _____
DOB: _____
Address: _____
City: _____ State: _____ Zip: _____
Home /Cell Phone: _____
E-mail: _____

Recipient's Information

Name of Institution: _____
Contact Name: _____
Address: _____
City: _____ State: _____ Zip: _____
Phone: _____
Fax: _____
E-mail: _____

Test Information

Name of Test: _____
Test Date: _____
Student ID Used at Testing Institution: _____

Send Test Score(s) To Recipient Via

- Electronic
Mail
Fax

Student's Authorization

Test Score(s) Release Form

~~~Test score(s) will not be released without signed authorization from student. ~~~

I, \_\_\_\_\_ authorize Texas A&M University-Texarkana to release my test score(s) to the,  
*Hand Print Your Name*  
institution, organization, or agency (Recipient) listed on this form.

\_\_\_\_\_  
*Student's Signature*

\_\_\_\_\_  
*Date*

### For Department Use Only

\_\_\_\_\_ Date Received

\_\_\_\_\_ Date Processed

\_\_\_\_\_ Staff Initials