



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:** _____

☐ **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): _____