



# Vance-Granville Community College

## Test Score Release Form

Please complete and sign the form. Include test scores to be released. Fax, email, or mail the form as directed below.

**FAX:** 252-738-3474

**EMAIL:** testingcenter@vgcc.edu

**MAIL:** Testing Center  
Vance-Granville Community College  
P.O. Box 917  
Henderson, NC 27536

Date of Request: \_\_\_\_\_

Name: (Print) \_\_\_\_\_

Name When Attending VGCC (if different): \_\_\_\_\_

VGCC ID#: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Address: \_\_\_\_\_

Home #: \_\_\_\_\_ Cell #: \_\_\_\_\_ Email: \_\_\_\_\_

**TEST SCORES TO BE RELEASED:**  Placement Test  TEAS  Other (Explain): \_\_\_\_\_

**I authorize Vance-Granville Community College to release my test scores to the following:**

1. Name of Institution: \_\_\_\_\_

Attention: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

2. Name of Institution: \_\_\_\_\_

Attention: \_\_\_\_\_ Email: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

**INSTRUCTIONS:**  Mail immediately  Email immediately  I will pick up

**SIGNATURE REQUIRED:** \_\_\_\_\_

**(For Office Use Only)**

Mailed Scores \_\_\_\_\_  Emailed Scores \_\_\_\_\_

Other (Explain) \_\_\_\_\_

Scores were withheld because of an outstanding obligation to VGCC.

**Signature** \_\_\_\_\_ **Campus** \_\_\_\_\_

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