



SCORE REQUEST FORM

To request a copy of your TSI scores, complete this form in its entirety (incomplete forms will not be processed); then email, fax or mail the completed form to:

Amarillo College Testing Services

P. O. Box 447, Amarillo TX 79178

Email: testingservices@actx.edu

Fax: (806) 371-5426

Name (at time of testing): _____

Other possible name(s): _____

Testing Location: _____

Date of Birth: _____ Last 4 Digits of Social Security: _____

Phone Number: _____ Approximate Testing Date: _____

Instructions for Testing Services Staff

Will pick up scores

Please send scores

Please send a copy of my TSI scores to the following mailing and/or email address:

**Test scores are confidential and may only be picked up by the tester after
identification has been verified. Phone requests are not accepted.**

Signature: _____

Date: _____

By signing above (manually or electronically), you are giving permission to Amarillo College to release a copy of your test scores to the above person or institution.