



Testing Services
26000 SE Stark
Gresham, Or 97030
(503) 491-7591
Fax: (503) 491-7594
Email: Testing@mhcc.edu

I _____

Hereby authorize Testing Services to release the following information contained in my records:

- College Placement Test Scores
- Other (please describe) _____

To the following individual or institution: _____

Please send the information by:

- Mail to: _____

- Fax (to the following number): _____
- Email (to the following email address): _____

Date: _____

SSN or Student ID#: _____

Printed Name: _____

Signature: _____

Phone Number: _____