

Washtenaw Community College
Testing Center
4800 E. Huron River Drive, SC 305
Ann Arbor, MI 48105

Phone: 734-477-8550

Fax: 734-677-5402

Placement Score Release Request

Required Information

Name (Print): _____

WCC Student ID: _____

Address: _____

Telephone Number: _____

Date of Testing (month/year) if known: _____

Name of Placement Test (Compass, Accuplacer, ALEKS): _____

I hereby authorize the Washtenaw Community College, Testing Center to release my
Compass Scores to the address listed below:

Signature of Examinee: _____ Date: _____

Please allow one week for processing.

I would like to have my scores sent to:

Name: _____

Address: _____ City: _____

Zip: _____ State: _____ Fax: _____