

## COMPASS® SCORE REPORT REQUEST FORM

COMPASS® score report requests will be issued when the **student's signature is obtained** and all obligations to Chippewa Valley Technical College are fulfilled.

\$	\$
<b>Balance Due</b>	<b>Paid</b>

There is a **\$5.00 charge per copy, \$15.00 for same-day, rush processing**. Requests will be processed within 48 hours if possible. Failure to complete this form in its entirety or enclose payment with your request will result in the request being returned to you.

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ID Number (Soc. Sec. No.)	Date of Birth	Home Phone Number	Work Phone Number # of Copies

Last Name	First Name	Middle Name	Maiden or Other Surname(s)
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Current Mailing Address (Street and/or PO Box, City, State, & Zip Code)

<b>Processing Instructions: (check all appropriate boxes below)</b>	
<input type="checkbox"/> I will pick-up in person at the E.C. Clairemont Campus	<b>Second Party Mailing Address/Fax # (below):</b>
<input type="checkbox"/> Please mail to me	
<input type="checkbox"/> Please <b>mail</b> to <b>second party</b> address (at right) →	
<input type="checkbox"/> Please <b>FAX</b> to <b>second party</b> address (at right) →	
Signature:	Date:
<b>THIS RECORD MAY NOT BE RELEASED TO ANYONE WITHOUT THE STUDENT'S WRITTEN PERMISSION</b>	

**Print, complete, and mail this request, together with cash, check, or money order payable to CVTC, to:**

- OR -

**FAX to:  
Please include your VISA, Discover, or Master Card number and expiration date.**

CVTC  
Attention: Counseling & Assessment Center  
620 West Clairemont Avenue  
Eau Claire, WI 54701-6162

715-833-6470  
Attention: Counseling & Assessment Center