

Request for Copy of Placement Test Scores

Testing Services
Dutchess Community College
53 Pendell Road
Poughkeepsie, New York 12601-1595

Date: _____



Student's Signature: _____

Authorizing issuance of test scores

Your Name and current address: (Please print plainly with ball point pen)

Last	First	Middle

Number	Street	

Town/City	State	Zip Code

(____)	_____	
Phone number	Your Email Address	

Name while attending DCC (if different from above)		

Student Number (A Number if available)

A _____

Date of Birth ____ / ____ / ____
month day year

Last 4 digits of Social Security Number _____

Please send a copy of my ACCUPLACER Placement Test Scores to:

Before requesting these test results be sent to another institution, ensure they will be accepted.
The Biology Test, Lumen Math Test, and Writing Appeal are locally created by DCC.



**Students are responsible for providing a correct and legible address. **

Send completed form to address above or email to: DCCplacementtesting@sunydutchess.edu
Or Fax: (845) 431-8609

Name of Recipient	Phone Number of Recipient	

Name/ Institution		

Address		

City	State	Zip Code

Institution Email Address and/or Fax #		