



## Request for Duplicate Score Report

**Directions:** Please use this form to request that Excel Testing send a duplicate copy of your Score Report. Please print or type all information on the form below. Make sure to include the correct fees, or your request will be returned.

**Fee:** \$20 each Score Report request. Please enclose a certified check or money order made payable to "Excel Testing." Do not send cash.

**Send To:** Excel Testing  
22 Concord St. 3<sup>rd</sup> Floor  
Manchester, NH 03101

Please complete the following form with your current name and address. All information must be complete and accurate to ensure proper processing. *Please print neatly and legibly.*

**First Name** \_\_\_\_\_ **Last Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Telephone** (\_\_\_\_) \_\_\_\_\_ **Social Security #** \_\_\_\_\_

If the above information was different at the time you were tested, please indicate original information below.

**First Name** \_\_\_\_\_ **Last Name** \_\_\_\_\_

**Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Telephone** (\_\_\_\_) \_\_\_\_\_ **Social Security #** \_\_\_\_\_

I hereby authorize Excel Testing to send to me at the address above a duplicate copy of my score report.

**Your Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_