

Request Form for TSI Assessment Scores

Student records are protected under the Family Educational Rights Protection Act (FERPA) and the MCC Records Access and Privacy Rights Policy and cannot be disclosed without written consent from the student. Therefore, this form must be completed and submitted to the MCC Testing Center prior to the retrieval or release of test scores. Note, MCC can only release TSIA scores that were taken through MCC to another College/University. Tests taken at another institution must be requested from that institution.

- A valid, unexpired photo ID must be provided when submitting this form. (Acceptable forms of IDs include an MCC student ID card, high school student ID card for the current school year, driver's license, state ID card, passport, military ID, etc.)
- You may submit this form and your valid ID in person. You may also send this form with a copy of your valid ID by mail to the address above, by email to the address above, or by fax to the number above.
- Please allow up to 2 business days to process your TSIA score request once it has been received.

STUDENT INFORMATION

Last Name	First Name	M.I.	Maiden
MCC ID or last 4 numbers of SSN	Date of Birth	Daytime Phone Number	
Address	Apt.#	City	State Zip Code

REQUEST INFORMATION

SECTION 1 – RETRIEVE TSI ASSESSMENT SCORES			
This section is for students who plan to enroll at McLennan Community College and have taken the TSI Assessment at a High School or College/University. By completing this section, you are allowing McLennan Community College to retrieve your TSI Assessment Scores.			
Name of High School/Institution you took the TSI Assessment		HS District (for HS requests ONLY)	
Exact name you used when you took the TSI (if different from above)			
SECTION 2 – RELEASE TSI ASSESSMENT SCORES/OFFICIAL SCORE REPORT			
This section is for students who have taken the TSI Assessment at McLennan Community College and are requesting an Official Score Report to be sent to another College/University.			
Please Check One: <input type="checkbox"/> Mail <input type="checkbox"/> Email <input type="checkbox"/> Fax <input type="checkbox"/> Pick Up by Student			
College/University/Institution		Fax Number (if applicable)	Email (if applicable)
Address	City	State	Zip Code

SIGNATURE REQUIRED

I hereby acknowledge that I am the student requesting my own scores and authorize McLennan Community College to retrieve my individual TSIA score report from the institution listed on this form and for those TSIA scores to be applied to my MCC student record, or to release my individual TSIA score report to the College/University specified above.

Student Signature	Date	Parent Signature (for students under 18 yrs.)	Date
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OFFICE USE: Date Received: _____ Processor's initials: _____ Date Processed: _____			
<input type="checkbox"/> Mail	<input type="checkbox"/> Email	<input type="checkbox"/> Fax	<input type="checkbox"/> Pick Up by Student