



STATE FAIR COMMUNITY COLLEGE
TEST SCORES RELEASE FORM

I, _____, give permission to:
(Please print name)

STATE FAIR COMMUNITY COLLEGE
TESTING SERVICES
3201 WEST 16th STREET
SEDALIA, MO 65301
Phone: (660) 530-5818
Fax: (660) 596-7475
Email: testing@sfccmo.edu

To release my _____ test results to:
NAME OF TEST

NAME OF PERSON AND INSTITUTION

Address OF INSTITUTION

Fax# of Institution

Graduation Year or test date _____

Original Signature _____

Transfer College Student ID _____

SFCC Student ID _____

Birthdate _____

Telephone Number _____

Date _____