



Hennepin Technical College™

TEST SCORE REQUEST

Allow 10 days for processing

Please Print or Type

Student Tech ID or StarID: _____ Date: _____

Student Name: _____ Phone: _____
Last Name First Name Middle Name

Street Address: _____

City / State / Zip: _____

Score Report Requested: Accuplacer NOCTI HESI Other _____

Approximate date test was taken: _____

Test taken at: Hennepin Technical College My High School: _____

Please Check One:

Will pickup at: Brooklyn Park Campus Eden Prairie Campus
Must present Photo ID for pickup at the front Security desk (either campus). All documents must be picked up within 2 weeks of original request.

Email scanned image to requested email address: _____

Fax to Name: _____ Fax Number: _____

Mail to Name: _____

Address: _____ City/State/Zip: _____

By signing this form, you are authorizing Hennepin Technical College to release specified information to the following:

Name of institution/person: _____

Student Signature: _____

Return this form by mail or email to: Hennepin Technical College, ATTN: Testing Center (*Testing@hennepintech.edu*)
Brooklyn Park Campus: 9000 Brooklyn Boulevard Brooklyn Park, MN 55445
Eden Prairie Campus: 13100 College View Drive, Eden Prairie, MN 55347

For Office Use Only

Date Received: _____ Completed By: _____ Completed Date: _____