

**COMPASS SCORE REPORT RELEASE AUTHORIZATION FORM**

Name (Please Print): \_\_\_\_\_  
Last First Maiden

List any other name(s) you may have had when you tested: \_\_\_\_\_

Social Security Number:

On which campus did you take the Compass assessment?

Bessemer (Approximate Date): \_\_\_\_\_ Birmingham (Approximate Date): \_\_\_\_\_

If you ever enrolled at LSCC, the Buckley/Pell Amendment to the *Family Education Rights and Privacy Act of 1974* prevents the release of your score report(s) without your written consent.

**Please check one:**  Student/unofficial copy Number of Copies:  1  2  
 Official Copy Number of Copies:  1  2

If you are requesting an official copy of your score report(s), please read the following statement and complete the information requested below.

**I authorize Lawson State Community College to release my Compass Score Report(s) to the schools(s), or organization(s) listed below. I understand that my score report(s) will be mailed within 24-48 hours of my initial request. Return this form by mail or fax to: Lawson State Community College, 1100 9th Ave. S.W., Bessemer, AL 35022, Attn.: Jeff Shelley, Admissions Office (FAX: 205-424-5119)**

**Please note that a student must be in good standing with the college before a score report may be released.**

1. College/Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
City State Zip

2. College/Organization: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
City State Zip

**REQUIRED**

My signature certifies that I have read and understood the above statements regarding the privacy act and issuance of Compass Score Reports. I give my permission for the release of my score report(s).

\_\_\_\_\_  
Signature Date

**Please provide us your current mailing address and contact information should we need to contact you.**

Address City State Zip Daytime Telephone Number