



**OKLAHOMA
CareerTech**

CTTC

CareerTech Testing Center

**CareerTech Testing Center
Authorization to Release Test Results**

I, _____, authorize the CareerTech Testing Center, a division of the
(Candidate's Name)
Oklahoma Department of CareerTech to release my test results to _____
(Name of Individual)
from _____
Organization/Facility - Email Address

Candidate's Name: _____

Candidate's Address: _____

Candidate's City/State/Zip: _____

(Candidate's Signature)

(Date)

Name of Witness: _____

Witness Signature: _____
(if under 18, must be parent/guardian)

Notary Seal/Stamp
(Required for mail requests)

NOTE: For requests made in person, the testing liaison must witness the Candidate's Signature on this form.

CareerTech Testing Center
Attn: Jennifer Palacio
c/o Oklahoma Dept. of CareerTech
1500 W. Seventh Avenue
Stillwater, OK 74074

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