CareerTech Testing Center

Authorization to Release Test Results

I, ___________________________, authorize the CareerTech Testing Center, a division of the Oklahoma Department of CareerTech to release my test results to ___________________________ 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)

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
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Stillwater, OK  74074

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