

Please print all information below.

ETS® Performance Assessments Score Review Request Form

See the ETS® Performance Assessments informational website for more information.

Complete this form to request a review of your performance assessment task score. Your request must be received within three (3) months of the score report date. If there is a change in your reported score, the revised score (which may be higher or lower than your originally reported score) will be reported to you and to the recipients of the original score. Your score for a specific task will be reviewed only once.

Date:				FTS Online Account ID:	
	Month	Day	Year		
Name	e (print your na	me as it appears in	your online accou	nt):	
First	Name:		M.I.:	Last Name:	
Stree	t Address:				
City:				State or Province:	
Zip or Postal Code:				Country Code:	
Emai	Address:				
Daytime Phone Number:				Evening Phone Number:	
	•	erformance assessing the Score Revie	·	, registration window and sub	mission window information for eac
Asse	essment Name		Task(s) to be Reviewed	Registration Window (Fall YYYY or Spring YYYY)	Task Submission Window (Original or Resubmission)
FEES:	Please comple	te the following:			
Total	number of task	s for this score revi	iew:	Total Fee (\$100 per task):	
Appli	cable taxes will	be added to the o	rder when it is pro	cessed.	
		rd only. All costs ar eturned unprocess		rders received without payme	nt, or with incorrect payment
□ A	merican Express	s® 🔲 Discover®	☐ MasterCard® [☐ Visa® ☐ JCB®	
Name	e on Credit Card	:			
Card	Number will be	collected over the	phone. Expiration	on Date:/	
I auth	norize ETS to cha	arge this account fo	or the Total Fee abo	ove.	

Signature:	Date:	Professional Educator
Send completed form to ETS by fax or email below: Fax:		PROGRAMS
(609) 683-2040		
Email:		

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