



Where Learning
Comes to Life

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www.skagit.edu
<http://www.skagit.edu/imageuploads/file1534.pdf>

Request for **ASSET/COMPASS** scores, **GED** transcript, or **GED** duplicate certificate

Name _____ Previous Names _____
(Please Print)

Student Identification Number _____ Birth date _____ Phone # _____

ASSET/COMPASS test taken – year _____ GED completed – year _____

I am requesting the following:

ASSET/COMPASS test scores GED duplicate certificate (\$4 fee) GED transcript (\$4 fee)

Please send to: _____
(name of individual or institution)

Address _____

City _____ State _____ Zip _____

I hereby authorize you to release my official ASSET scores, GED transcript, or GED duplicate certificate.

(signature)

(date)

A Signed form may be faxed to the Counseling Office @ 360-416-7676