

# *Southern Regional Testing Agency, Inc.*

*4698 Honeygrove Road, Suite 2*

*Virginia Beach, VA 23455*

*Phone: 757-318-9083*

## SCORE CARD REQUEST FORM

If you would like to request a duplicate copy of your scores to be sent to your home or to a state board, please complete the information below. We utilize your social security number only for verification purposes and to locate your examination records. Please **mail** this form to the address provided above along with your **money order or cashiers check made out to SRTA.**

Please type or legibly write your information below.

<b>Candidate Information</b>	<b>Examination Information:</b>
<b>Name:</b>	<b>Exam Date:</b>
<b>Social Security #:</b>	<b>Exam Site:</b>
<b>Address:</b>	<b>Exam Type: (Dental or Dental Hygiene)</b>
<b>Phone #:</b>	<b>E-mail:</b>

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**Address of where you would like us to send your score card to:**

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**Score Card Fees: \*Please note that we cannot accept personal nor business checks!\***

**\$35/each:** Duplicate Copy to be sent to your home address or to a SRTA Member State Board.  
(Arkansas, Kentucky, South Carolina, Tennessee, Virginia, West Virginia)

**\$60/each:** To be sent to a **Non-member State Board**

**\$5/each:** Additional charge for **Notarization**