# Test Results Request Form

**Mail to:** RICA Program
Evaluation Systems
Pearson
P.O. Box 348150
Sacramento, CA 95834-8150

## IMPORTANT INFORMATION

- Use this form to request an additional copy of your test results for either the RICA Written Examination or the RICA Video Performance Assessment.
- If you want to correct or change identification information on your score report (e.g., social security number, misspelled name), enclose a signed, written request describing the correction. If you have legally changed your name, you must submit documentation of the change.
- Additional copies are available beginning two weeks after original score reports are mailed, for up to five years after the test date. Allow two to four weeks for delivery. Passing scores must initially be used toward certification within five years of the test date.

**Additional copy of test results fee: $10**
Make money order or cashier's check payable to Evaluation Systems in U.S. dollars.
**Do not send cash or a personal check for this service.**

1. **Name**
   Last | First | Middle Initial

2. **Address** ☐ Check here if address is different from address on original registration.
   P.O. Box or Street Address
   City or Town | State | ZIP Code

3. **Social Security Number**

4. **Date of Birth**

**Payable by Money Order or Cashier's Check Only**

5. **Telephone Numbers** Daytime (Area Code) Evening (Area Code)

6. **For which RICA assessment are you requesting an additional copy of your test results?** Check one of the following:
   - ☐ RICA Written Examination (Complete sections 7 and 9 below.)
   - ☐ RICA Video Performance Assessment (Complete sections 8 and 9 below.)

7. **Written Examination Test Date** for which you are requesting an additional copy: Month | Year

8. **Video Performance Assessment Submission Deadline** for which you are requesting an additional copy: Month | Year

9. I certify that I am the person whose name and address appear on this form.

Signature _____ Date _____

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