

GMAT ADDITIONAL SCORE REPORT REQUEST

To avoid delay in having your scores reported, do not send a letter with this form.
Do not use this form after August 10, 1995.

See Graduate Schools of Management list, Appendix C in *Bulletin*, for code numbers and names. If an institution is not listed, leave the code number boxes blank.

PRINT DATE
07/02/94

PLEASE SEND THE SCORE REPORTS TO:

CODE	GRADUATE SCHOOLS OF MANAGEMENT

If you entered a **FUTURE DATE**, your scores will be reported after scores from that test date become available.
If you entered a **PREVIOUS DATE**, your scores will be processed within three working days.
If you have taken the GMAT more than once, your scores from up to the three most recent administrations will be reported.

TEST DATE	
Month	Year
ETS Use Only	

Check if paying by MasterCard or VISA and enter your card number and expiration date. If paying by MasterCard or VISA, you may fax this form to GMAT at 609-889-3339.

Credit Card Number: _____ Expiration Date: _____
Credit Card Number

The fee is \$10 per report.
No. of Reports: _____ X \$10 = \$ _____
In Canada, add GST \$ _____ (R1911-98)
TOTAL AMOUNT \$ _____

Signature: _____

SOCIAL SECURITY NUMBER		
REGISTRATION NUMBER		
575333		
DATE OF BIRTH		
06	11	59
Month	Day	Year

You may pay by check, bank draft, money order, MasterCard, or VISA. Checks, bank drafts, and money orders should be made payable to GMAT ETS. DO NOT SEND CASH OR STAMPS. A form received without payment will be returned to you. Fees are subject to change without notice.

In mailing this form and payment, send to:

GMAT
Educational Testing Service
P.O. Box 6104
Princeton, NJ 08541-6104, USA

JOHN WAUGH
4 HAYWARDS CLOSE
HENLEY ON THAME

RG9 1UY
ENGLAND

SIGNATURE: By signing this form, I authorize Educational Testing Service to release my GMAT scores, under conditions set forth in the *Bulletin of Information*, to the graduate schools of management designated above.

GMAT

SCORE REPORT EXAMINEE COPY

GRADUATE MANAGEMENT ADMISSION TEST

REGISTRATION NUMBER	PRINT DATE
575333	07/02/94

NAME				SEX	DATE OF BIRTH			SOCIAL SECURITY NUMBER	TELEPHONE NUMBER
LAST	FIRST	M.I.			Month	Day	Year		
WAUGH	JOHN			M	06	11	59		

DATE OF GRADUATION	SELF-REPORTED UNDERGRAD. GPA	UNDERGRADUATE MAJOR	CITIZENSHIP COUNTRY	UNDERGRADUATE INSTITUTION
Mo: Yr:	NA			

INTENDED GRADUATE STUDY	EDUCATIONAL EXPERIENCE	SCORES							
		TEST DATE		SCALED SCORES					
		Month	Year	VERBAL SCORE	% BELOW	QUANT SCORE	% BELOW	TOTAL SCORE	% BELOW
		06	94	41	94	44	92	680	96

SUPPLEMENTARY SCORE INFORMATION*						
TEST DATE		RAW SCORE				
Month	Year	Rght	Wrong	Omit	Corrected Raw Score	
06	94					
VERBAL		060	008	002	058	
QUANTITATIVE		054	010	001	052	
TOTAL		114	018	003	110	

*This information is from the most recent administration only. It is reported once, and only to those eligible for test administration. It is not being sent to the graduate schools you designated as score recipients.

CODE	Your scores have been sent to the GRADUATE SCHOOLS OF MANAGEMENT listed below.