



TOEFL

**Computer-based Test
Examinee's Score Record**
for the Test of English as
a Foreign Language

Appointment Number: 8885 0000 0029 6514			
TECHAPANICHGUL, KITTIPONG NAME (Family or Surname, Given, Middle)			
06/18/2004 Month/Day/Year Test Date	08481 Test Center Number	11/27/81 Month/Day/Year Date of Birth	M Sex
2194 2194 2074 5814	90 99 99 99	THAILAND Native Country	
Institution Code	Department Code	THAI Native Language	
XXXX Sponsor Code	1 Degree	2 Reason for Taking TOEFL	



TOEFL Scale Scores			
25	25	25	250
Listening	Structure/ Writing	Reading	Total Score
Essay Rating 4.0			

Examinee's Mailing Address:

TECHAPANICHGUL, KITTIPONG
151/18 MOO.9 BANGWAK RD.
BANGPAI BANGKAE
BANGKOK 10160
THAILAND

75

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ETS TOEFL SCORE REPORT REQUEST FORM (Do not use this form after June 30, 2004.)

Read the directions on the back of this form. All the information requested must be given or the form will be returned to you.
Scores more than two years old cannot be reported or verified.

Check if paying by American Express Discover JCB
 MasterCard VISA
and enter your card number and expiration date.

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\$75	\$90	\$105	\$120

Reports will be mailed two weeks after receipt of request by TOEFL, or after scores become available.

In Canada, add GST/HST (Reg. No. 131414468 RT) and QST (Reg. No. 1087967545) to total remittance.

8885 0000 0029 6514

APPOINTMENT CONFIRMATION NUMBER

TECHAPANICHGUL, KITTIPONG

NAME

11/27/81

06/18/2004

08481

ETS USE ONLY

Month Day Year
DATE OF BIRTH

Month Day Year
TEST DATE

CENTER
NUMBER

INSTITUTION

ADDRESS

INSTITUTION
CODE

NAME OF DEPARTMENT

DEPT.
CODE

YOUR MAILING ADDRESS

Check the box if your mailing address has changed since the test date you indicated above. Print your correct address below.

I authorize ETS to release my TOEFL scores to the institutions designated above, under the conditions set forth in the Information Bulletin.

YOUR SIGNATURE _____

DATE _____

If your mailing address has changed since the test date indicated on this form, print your name and new address in the boxes provided. Use English letters. Leave a blank box after each complete number or word.

Print your family name (surname), given name, then middle name if you have one. Leave a blank box between names.

NAME

MAILING
OR
STREET
ADDRESS

CITY,
STATE, OR
PROVINCE

ZIP/POSTAL CODE