

California State University, Long Beach  
GWAR Placement Examination (GPE)  
Prior to Fall 2016 called WPE  
Score Report Request Form  
Deliver or mail this completed form to:  
California State University, Long Beach  
Testing & Evaluation  
1250 Bellflower Blvd., LA5- 173  
Long Beach, CA 90840-0110  
(562) 985-4007 / [testing@csulb.edu](mailto:testing@csulb.edu)

*Score report requests may take up to five working days to process. All applicable fields must be completed, or your score report request may be delayed.*

**PLEASE PRINT CLEARLY-**

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Student ID # \_\_\_\_\_ Social Security # \_\_\_\_\_ Date of Birth \_\_\_\_\_

Phone ( ) \_\_\_\_\_ - \_\_\_\_\_ E-mail address \_\_\_\_\_

Please list any other name(s), Social Security or Student ID numbers used while enrolled at CSULB:

\_\_\_\_\_

Please indicate when you most recently took the WPE or GPE: \_\_\_\_\_

**Indicate where you would like your score report sent:**

Your name: \_\_\_\_\_

Street Name: \_\_\_\_\_ Apt \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

School (if applicable): \_\_\_\_\_

Street: \_\_\_\_\_ Building/Suite \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Your signature: \_\_\_\_\_

Today's date: \_\_\_\_\_



**For Office Use Only:**

Date Request Received: \_\_\_\_\_

Date Request Processed: \_\_\_\_\_

Staff Initials: \_\_\_\_\_