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**Certified Paralegal Exam Information Release**

Please complete this form **only** to provide your score to a third-party.

I hereby authorize **NALA – The Paralegal Association** (“NALA”) to release my aggregate Certified Paralegal Exam scores to \_\_\_\_\_ (individual) from \_\_\_\_\_ (company/school).

I understand that by signing this authorization:

- I authorize the use of my aggregate data for school research purposes.
- I have the right to withdraw permission for the release of my information. If I sign this authorization to use or disclose information, I can revoke that authorization at any time. The revocation must be made in writing to NALA and will not affect information that has already been used or disclosed.
- I have a right to receive a copy of this authorization.
- I am signing this authorization voluntarily.
- I further understand that a person to whom data are disclosed pursuant to this authorization may not further use or disclose my information unless another authorization is obtained from me or unless such disclosure is specifically required or permitted by law.

\_\_\_\_\_  
(Examinee’s Name) (Account #)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Email) (Phone)

\_\_\_\_\_  
(Examinee’s Signature) (Date)

Please scan and return this form to **testing@nala.org**.