

Date: _____



Hand Score Request Form

If a failing score is received, candidates may request to have their results verified by hand. To request a manual hand score, candidates must submit this Hand Score Request Form along with the hand score fee of \$50. This form must be received by PTCB within thirty (30) days of receipt of test scores and must include the fee in the form of a check or money order made payable to PTCB. If this Hand Score Request Form is incomplete and does not include the required fee, it will not be processed. Please allow 4-6 weeks for hand score request results. Please note that the results of the hand score are final. It is important to note that hand scoring has never revealed a score discrepancy, and PTCB has never changed a result based on a hand score.

Do not submit this form until you have received your official exam results.

Candidate Information

First Name: _____ PTCB Account ID: _____

Last Name: _____

Address: _____

City: _____ State: Zip Code: _____

Exam Date: _____

I hereby request that PTCB hand score my PTCE results. I understand and agree that:

- o PTCB will conduct a one-time manual hand score of my recent PTCE attempt.
- o The results of the manual hand score of my examination is final
- o In the event that my initial score received is accurate and verified by the manual hand scoring of my examination, all PTCB certification eligibility and examination retake policies apply.

Candidate Signature: _____ Date: _____

Please submit this completed form along with the hand score fee to:
Pharmacy Technician Certification Board
P.O. Box 75430
Baltimore, MD 21275

This form must be received by PTCB within 30 days of receipt of test scores.