



ALPP Request for Examination Re-Scoring: Advanced Nurse Lactation Consultant  
(ANLC)

Name

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Home Address

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City

State

Zip

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Daytime Phone

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Email Address

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Date of ANLC Examination

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Location of ANLC Examination

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Please re-score my exam results from the ANLC Examination Location listed above. I understand that this request must be submitted within 30 days of the release of my original examination results. I can be contacted at the address listed above.

Submitted by:

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Signature

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Please print your name above

Page 1/1

Updated 3-5-2021

**Send completed application to:**

Academy of Lactation Policy and Practice

Department of Certification - ANLC

PO Box 2170

South Dennis, MA 02660

OR fax to: (508)-833-6070