

For your convenience, please photocopy this form.

Test Purchaser Qualification Form

Riverside Publishing requires all first-time test purchasers to furnish evidence of their qualifications to use tests. Test use should be consistent with sound professional practice, particularly those principles outlined in the 1985 APA, AERA, NCME publication, *Standards for Educational and Psychological Testing*. Supply the information requested below, read carefully the "Principles of Effective Test Use," and sign the form to indicate acceptance of the responsibility for proper use of tests.

Sales Tax Exempt No. _____ Not Tax Exempt
(attach copy of certificate)

Identification Information (Please print and complete all blanks)

Name _____ Employer _____
 Title _____ Supervisor _____
 Address _____ Address _____
 City _____ State _____ Zip _____ City _____ State _____ Zip _____
 Phone _____ / _____ / _____ Phone _____ / _____ / _____
 area code area code
 Fax _____ / _____ - _____ Fax _____ / _____ - _____
 area code area code
 E-mail address _____

A. Evidence of Appropriate Training in the Use of Tests

1. Your level of training (check as many as apply)

Bachelor's Degree: Year _____ Institution _____ Major field of study _____
 Master's Degree: Year _____ Institution _____ Major field of study _____
 Doctorate: Year _____ Institution _____ Major field of study _____

2. Your professional credentials (check as many as apply)

Licensed in: Area _____ State _____ License # _____ Expiration Date _____
 Member of professional organizations (circle all that apply) ACA AERA APA ASHA CEC NASP NCME Other
 Formally recognized professional competence (fellow, diplomate, special certificate): fellow diplomate other certification
 Organization _____

3. Your educational background (courses and other study)

a. Courses (check each course completed and circle level at which course was completed)

U=Undergraduate, G=Graduate, O=Other (special courses you have completed, workshops, in-service training, etc.)

	(circle)				(circle)		
<input type="checkbox"/> Basic tests and measurements	U	G	O	<input type="checkbox"/> Use of tests in counseling	U	G	O
<input type="checkbox"/> Descriptive statistics	U	G	O	<input type="checkbox"/> Career assessment	U	G	O
<input type="checkbox"/> Intelligence testing/Cognitive ability	U	G	O	<input type="checkbox"/> Neuropsychological assessment	U	G	O
<input type="checkbox"/> Speech, hearing, language assessment	U	G	O	<input type="checkbox"/> Other (list below)			
<input type="checkbox"/> Educational diagnostics	U	G	O	_____	U	G	O
<input type="checkbox"/> Assessment course in major field:	U	G	O	_____	U	G	O
				_____	U	G	O

b. Other Study (check each type of program completed)

Practicum in test administration and interpretation
 Internship (list type: school psychology, counseling, etc.) _____
 Attending workshops, seminars, conferences (please specify): _____

4. Your special competence (List one test which you use regularly that best illustrates your skill in test administration and interpretation): _____

B. Evidence of Acceptance of the Responsibility for Sound Use of Tests

Principles of Effective Test Use

Sound, professional use of educational and psychological tests means that all test users must:

- maintain the security of testing materials before and after testing
- avoid labeling students based on a single test score
- adhere strictly to the copyright law and under no circumstances photocopy or otherwise reproduce answer forms, test books, or manuals
- administer, score, interpret, and use tests exactly as specified in the manual
- release results only to authorized persons and in a form in keeping with accepted principles of test interpretation

I certify to Riverside Publishing that I have the appropriate training and competencies to administer, score, and interpret the test materials I seek to purchase. I assume full responsibility for the proper use of the test materials I order from Riverside Publishing.

Your signature indicates acceptance of and compliance with the above principles.

Signature _____ Date _____ / _____ / _____