

Cognitive Abilities Test™ (CogAT), Form 6 2012 Order Form

Right Size Packages

Date ____/____/____ Purchase order # _____

PAYMENT INFORMATION

Please print or type and complete all blanks. In “**CHARGE TO**” section, indicate address where your credit card statement is sent (if different from “**SHIP TO**” address).

Payment enclosed: \$ _____

Charge my credit card:

 Visa MasterCard American Express

 Diners Club Discover

Card Number: _____

Expiration Date: _____

Authorized Signature: _____

 Exempt from state sales tax (Please attach copy of certificate.)

Cert. No: _____

Choose One:

 Test Purchaser Qualification Form attached

 Test Purchaser Qualification Form on file at Riverside

Note: Orders from first time purchasers require a Test Purchaser Qualification Form and must be accompanied by a check or credit card number.

CHARGE TO:

Name _____

Position _____

Billing Address _____

City _____ State _____ ZIP _____

Phone: Area Code _____

Fax: Area Code _____

e-mail address _____

SHIP TO: (if different than billing address)

Name _____

Position _____

Billing Address _____

City _____ State _____ ZIP _____

Phone: Area Code _____

Fax: Area Code _____

e-mail address _____



SEND ORDERS TO

Assessment Resource Center
2800 Maguire Blvd • Columbia, MO 65211

Phone: 573-882-4694 or 800-366-8232

Fax: 573-882-8937

http://arc.missouri.edu

ORDER FULFILLMENT AND BILLING

Riverside Publishing will fill and ship orders for *CogAT, Form 6*, test materials. Riverside will **bill** school districts directly for these products and services.

The **Assessment Resource Center (ARC)** will score completed answer documents, report results, and bill schools for these services. A scoring order packet from ARC will follow your materials order. Please use this packet to return your completed testing materials for scoring.

Riverside Publishing
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Cognitive Abilities Test™ (CogAT), Form 6 2012 Order Form (continued)

Right Size Packages

ITEM AND PACKAGING	Quantity	Unit Price	TOTAL Price
Test Materials			
Machine-Scorable Test Booklets			
<i>Package of 5, includes 1 Directions for Administration</i>			
Level K ----- 1446019	_____	\$28.36	\$ _____
Level 1 ----- 1446020	_____	\$27.99	\$ _____
Level 2 ----- 1446021	_____	\$27.99	\$ _____
Reusable Test Booklets			
<i>Package of 5, includes 1 Directions for Administration</i>			
Level A ----- 1446022	_____	\$21.90	\$ _____
Level B ----- 1446023	_____	\$21.90	\$ _____
Level C ----- 1446024	_____	\$21.90	\$ _____
Level D ----- 1446025	_____	\$21.90	\$ _____
Level E ----- 1446026	_____	\$21.90	\$ _____
Level F ----- 1446027	_____	\$21.90	\$ _____
Level G ----- 1446028	_____	\$21.90	\$ _____
Level H ----- 1446029	_____	\$21.90	\$ _____
Directions for Administration			
<i>Single copy</i>			
Level K ----- 1445988	_____	\$18.57	\$ _____
Level 1 ----- 1445990	_____	\$18.57	\$ _____
Level 2 ----- 1445992	_____	\$18.57	\$ _____
Level A–H ----- 1446005	_____	\$18.57	\$ _____

Total this page \$ _____

Cognitive Abilities Test™ (CogAT), Form 6 2012 Order Form (continued)

Right Size Packages

ITEM AND PACKAGING	Quantity	Unit Price	TOTAL Price
Answer Documents			
Answer Sheets			
Package of 15			
Levels A–H ----- 1446030	_____	\$16.85	\$ _____
Combined Answer Documents			
Iowa Tests of Basic Skills (ITBS), Form A, Complete Battery and the Cognitive Abilities Test (CogAT), Form 6			
Package of 15			
Form A, Level 9 with Word Analysis and Listening/CogAT 6, Levels A–H ----- 1446279	_____	\$19.25	\$ _____
Form A, Level 9 with CogAT 6, Levels A–H ----- 1446278	_____	\$19.25	\$ _____
Form A, Level 10 with CogAT 6, Levels A–H ----- 1446280	_____	\$19.25	\$ _____
Form A, Level 11 with CogAT 6, Levels A–H ----- 1446281	_____	\$19.25	\$ _____
Form A, Level 12 with CogAT 6, Levels A–H ----- 1446282	_____	\$19.25	\$ _____
Form A, Level 13 with CogAT 6, Levels A–H ----- 1446283	_____	\$19.25	\$ _____
Form A, Level 14 with CogAT 6, Levels A–H ----- 1446285	_____	\$19.25	\$ _____

Total this page \$ _____

Subtotal \$ _____

Add 10% shipping & handling \$ _____

Add Sales Tax (if applicable) \$ _____

Prices subject to change.

TOTAL \$ _____