

QUALIFICATIONS TO PURCHASE

Moving Boundaries Inc. sells psychological tests and materials to qualified professional users in accordance with the APA Standards for Educational and Psychological Testing and Moving Boundaries guidelines.

To satisfy the requirements you must have at least a BA/BS degree from an accredited college or university and have completed coursework in Tests and Measurement or participation in a Moving Boundaries Inc. credentialing workshop.

Students who want to order the SL-TDI for research must complete the Qualifications Form *and* have their supervising faculty member sign the qualification form. (See our special terms for those conducting research studies with the SL-TDI.)

To establish your professional qualifications to become a Singer-Loomis Provider, print and complete this *Qualifications to Purchase* form and send it to us.

You may: 1) E-mail the completed Qualifications to Purchase form to info@movingboundaries.com; 2) Fax the completed form to Moving Boundaries Inc. at 503-661-5304; or 3) mail it to--Moving Boundaries, inc. 1375 SW Blaine Court Gresham, Oregon, 97080 USA.

When we have your completed document, we will review your qualifications and, as promptly as possible, send you an e-mail about the results of our review.

Name _____
Title _____
Organization Name _____
Address _____
City _____ State _____ ZIP _____
Phone # _____ E-Mail _____

Primary type of practice: Private Practice/ Personal Organization/Institution
Highest professional degree attained:

Degree _____
Major Field _____ Year _____
Institution _____

Academic course work completed in Tests and Measurements or equivalent:

Course _____ Date _____ Institution _____
Course _____ Date _____ Institution _____
Course _____ Date _____ Institution _____

Participation in Moving Boundaries Inc. approved workshop(s):

Institute _____ Date _____ Location _____
Institute _____ Date _____ Location _____

I certify that all the information contained in this form is accurate. I certify that any test products that I purchase from Moving Boundaries Inc. will be used by me and/or members of my institution or organization in accordance with the *Standards for Educational and Psychological Testing*. I further agree to abide by the terms set forth in the Moving Boundaries website.

Signature _____ Date _____