Scholastic Testing Service, Inc. • 480 Meyer Road • Bensenville, Illinois 60106–1617

GENERAL ORDER FORM

GENERAL

Acct. No. _____ Ref. No. _____

Ship To (please print)

School Name _____

Address _____

City/State _____

Attention: _____ ( ) Zip
Phone Number

Purchase Order No. _____
(Attach purchase order and any special billing forms that may be needed.)

Email Address _____

Date of Order _____

To order by phone, call 1.800.642.6STS (6787) (continental U.S.) or 1.630.766.7150 (elsewhere). To order by fax, dial 1.866.766.8054 or email us at sts@mail.ststesting.com.

Bill To or Credit Card Billing Information

School/Cardholder Name _____

Address _____

City/State _____

Attention: _____ ( ) Zip
Phone Number

If you prefer to charge this purchase, please circle the appropriate box.

VISA MasterCard AMERICAN EXPRESS Expiration Date ☐☐/☐☐

Account Number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Signature _____

TESTING INFORMATION

Testing date _____ Date required _____

Check one: ☐ STS Scoring ☐ School Scoring

SAMPLE SETS†
state quantity, level, and/or form for each

_____

_____

_____

_____

†nonreturnable

MATERIALS

Quantity	Unit (ea. pkg*)	Description of Materials	Level	Form	Price

*Most products must be ordered in packages.

Subtotal _____

10% Shipping plus Handling _____
("Prices and Terms" no. 3 for international orders on Customer Service web page.)

Total Due _____