

Permission Request Form Online Submission

To ensure a timely response, please complete this form in its entirety (as applicable).

Upon submission of a completed form, your request will be reviewed and we will contact you in within 1-2 business days with instructions and information regarding associated costs.

Contact Information

First	<input style="width: 95%;" type="text"/>	Middle	<input style="width: 95%;" type="text"/>	Last	<input style="width: 95%;" type="text"/>
Customer Number	<input style="width: 95%;" type="text"/>	Position/Title	<input style="width: 95%;" type="text"/>		
Company/Institution	<input style="width: 95%;" type="text"/>				
Street Address	<input style="width: 95%;" type="text"/>				
Address 1	<input style="width: 95%;" type="text"/>				
Address 2	<input style="width: 95%;" type="text"/>				
Address 3	<input style="width: 95%;" type="text"/>				
City	<input style="width: 95%;" type="text"/>	State/Province	<input style="width: 95%;" type="text"/>		
Postal Code	<input style="width: 95%;" type="text"/>	Country	<input style="width: 95%;" type="text"/>		
E-mail Address	<input style="width: 95%;" type="text"/>	Telephone	<input style="width: 95%;" type="text"/>		
Fax	<input style="width: 95%;" type="text"/>				

Who will be the qualified individual overseeing the use of this instrument?

Test/Publication Information

Name of PAR test/publication you wish to use, adapt, or modify:	<input style="width: 95%;" type="text"/>
Edition	<input style="width: 95%;" type="text"/>
Author (if known)	<input style="width: 95%;" type="text"/>

Do you already have a copy of the PAR test in English? Yes No

Specific list of materials you wish to reproduce (i.e., pages, tables, pictures, etc.). *Note: We may contact you for copies of the specific materials you are requesting to use.*

Can you use the published/English version of the test? Yes No

Brief description of your request. Reason the published/printed form cannot be purchased and used.

If you only wish to use a portion of an assessment, how many of the test items do you wish to use?

If you only plan to use certain subscales, how many subscales do you wish to use?

What is the name(s) of the subscale(s)?

If you wish to modify the format/wording of the test (i.e., use a different answer sheet), how do you plan to modify the test form?

Please indicate one of the following:

- This test will be used for: Student Research (Dissertation/Thesis)
 Research
 Clinical Purposes

If for research, please provide title of the research study.

If for clinical purposes, please describe the population the test will be used with.

How many people will you be testing using the specified assessment?

How many times will each person be tested?

How will the test be administered? (via paper/pencil, online/Internet)

How will the test be distributed to participants? (mail, online, in-person, other-please explain)

If online/Internet:

How do you intend to design the website to ensure that the assessment is secure?

How will you limit access to the website to ensure that only subjects participating in your study have access to it and be able to complete the assessment?

Will the website be password protected for participant entry? Yes No

Will the website incorporate an accurate counting mechanism to ensure that we have an exact count of the number of times the assessment was accessed/administered? Yes No

Will the website be designed in such a way that the assessment or any items from the assessment cannot be printed from the site? Yes No

What is the timeframe the test will be online? Beginning: End:

Permission to Create/Use an Existing Translation

Please be sure to contact a PAR Customer Support Specialist to determine whether an existing translation is available.

If a translation is available, please specify the language version you hope to obtain.

If the translation you need is not currently available, and you wish to translate the assessment, in which language do you wish to translate the measure? *Please note for translations, independent technical and validation data is usually not available.*

Purpose of Translation?

Name and qualifications of the individual(s) who will be conducting the translation.

Name and qualifications of the individual(s) who will back-translate the materials for our review.

Reproduction for Purpose of Publication/Presentation

Do you wish to include sample items or other material from this instrument in a publication? Yes No

If yes, provide details.

For an appendix of dissertation or thesis, provide title;

For a journal article, provide name of journal, title of article, author, approximate date of publication;

For a book, provide name of publisher, title of book, author, type of media, approximate date of publication.

Additional Comments

To Submit Form

1. If you're using an e-mail application such as Outlook, Eudora, or Mail, complete the Permission Request Form and click "Submit Form."
2. If you're using an Internet e-mail service such as Yahoo or Hotmail, complete the Permission Request Form, save the form on your computer, and manually e-mail it to copyright@parinc.com.

Submit Form