

## **Creating Connections. Changing Lives.**

## **Permission Request Form**

To request special permission, please save the Permission Request Form to your computer, complete the relevant sections, and email the completed form to copyright@parinc.com.

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 Informat	tion ————
First	Middle	Last
Customer Number	Position/Title	
Company/Institution		
Street Address		
Address 1		
Address 2		
Address 3		
City	State/I	Province
Postal Code	Country	
E-mail Address	Telephone	
Fax		
Who will be the qualified individu	al overseeing the use of this instrument?	
	Test/Publication Infor	rmation —
Name of PAR test/publication you	rish to use, adapt, or modify:	
	Edition	
	Author (if known)	
Do you already have a copy of the F	-	Note: We may contact you for copies of the specific materials

Can you use the published/English version of the test? Yes \(\simega\) No \(\simega\)
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-pleas	se 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 the assessment?	your study hav	ve access to it and	be able to complete
Will the website be password protected for participant entry? Yes O No O			
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?	e Yes O N	10 O	
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 O No O			
What is the timeframe the test will be online? Beginning:	End:		
Permission to Create/Use an Exist	ing Translo	ation ——	
Please be sure to contact a PAR Customer Support Specialist to determin	e whether an e	existing translation	on 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 as the measure? <i>Please note for translations, independent technical and validation data is a</i>		0 0	you wish to translate
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 fo	r 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 O No O				
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.				
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