



Request for Report Copies

Name: _____
(family/last) (given/first) (second/middle/maiden)

Date of Birth: ____/____/____
month day year

Telephone: (____) _____

Email: _____

Report Delivery Information

Report Copy/Copies: _____ X \$25 = _____
of Copies

Please provide an institutional delivery address and indicate **one** mailing service for each report copy being requested. If no mailing service is checked, the copy will be sent by regular mail. If you need more space, please download another form to fill out. If selecting email, confirm with your recipient that they will accept an emailed copy.

Report Copy 1:

Report Copy 2:

- Regular Mail (Included)
- Priority Mail (\$15, US address)
- Email (Included)
- Domestic Courier (\$35, US address)
- International Courier (\$65)

- Regular Mail (Included)
- Priority Mail (\$15, US address)
- Email (Included)
- Domestic Courier (\$35, US address)
- International Courier (\$65)

Fees must be paid in US dollars. Payments from outside the US must be drawn on a US bank.

I am enclosing a check/money order/ cashier's check made payable to **Educational Perspectives**.

Today's date _____ Signature **(REQUIRED)**

Name (printed) _____