

Training Partner Program Roster Submittal Form Speech & Language Assessment Class Packs

If you are an approved TPP member teaching Speech & Language Assessments in your program and would like your students to have access to a suite of digital assessment tools, please complete this form. Please note, this form is only to be used by TPP members. To apply to become a TPP member please visit www.pearsonclinical.com/TPP and fill out the [membership application](#)

Please complete this form in its entirety and fax to: 1800-232-1223 Attn: TPP Team (OR) for faster processing, complete the webform at pearsonclinical.com/orders and attach this form. Please make sure to complete all required fields. Select 'Q-Global' as your product name and 'order/status' as your submission category.

Once this form is submitted and approved, class pack materials will be available in your Q-global account in 3-5 days.

Professor/Class Information

Professor's Name:			
University:			
Department/Program:			
Course(s) in which material will be used:			
Year/Semester:			
Phone Number:			
Email Address:			
Q-global Account #:			
SHIPPING ADDRESS:		BILLING ADDRESS:	
Address:		Address:	
Address: 2		Address: 2	
City:	State:	Zip	City: State: Zip

Products Requested

Please list the quantity of class packs needed for your class along with your student roster.

Qty	ISBN/Product Number:	Description:	List Price:
1	QG015-8011-163	TPP SLP Class Pack on Q-global	No Charge

Student Roster

Terms & Conditions

I certify that the students listed above will be using these materials under my supervision and for educational purposes only as outlined in the [TPP Terms & Conditions](#)

Signature: _____ Date: _____