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Autism Diagnostic Interview – Revised (ADI-R)*

Michael Rutter, MD FRS,
Ann LeCouteur, MBBS and
Catherine Lord, PhD
WPS

Purpose To assess individuals suspected of having autism

Candidates 2+ years of age

Administration 1.5–2.5 hours

Content

Used in research for decades, the ADI-R provides a thorough assessment of individuals suspected of having autism or other autism spectrum disorders. It has proven highly useful for formal diagnosis as well as treatment and educational planning.

Composed of 93 items, the ADI-R focuses on three functional domains:

- Language and Communication
- Reciprocal Social Interactions
- Restricted, Repetitive, and Stereotyped Behaviors and Interests

Interview questions address the child's background, behavior, early development, language acquisition, current functioning, social development, and other clinically relevant issues, such as aggression, self-injury, and possible epileptic features.

To administer the ADI-R, an experienced interviewer, following highly standardized procedures, questions a parent or caregiver. Results are scored and interpreted using a Diagnostic Algorithm, a Current Behavior Algorithm, or both, depending on the purpose of the evaluation. Typically, administration and scoring require from 1.5 to 2.5 hours.

The interview can be used to assess both children and adults, as long as their mental ages are above 2 years, 0 months.

Because the ADI-R is an interview rather than a test, and because it focuses on behaviors that are rare in non-affected individuals, it provides neither scales nor norms. Results can be used to support a diagnosis of autism or to determine the clinical needs of various groups in which a high rate of autism spectrum disorders might be expected. The ADI-R has proven very effective in differentiating autism from other developmental disorders and in assessing syndrome boundaries, identifying new subgroups, and quantifying autistic symptomatology.

Kit 990ADI \$400.00

Includes 10 Interview Booklets; Manual; 12 Current Behavior Algorithms (4 for ages 3–11 and younger; 4 for ages 4–0 through 9–11; and 4 for ages 10–0 and older); 12 Diagnostic Algorithms (6 for ages 2–0 through 3–11 and 6 for ages 4–0 and older)

Interview Booklet 85 pages 600ADI \$150.00

Manual 500ADI \$120.00

Current Behavior Algorithm 601ADI \$50.00
(10 for ages 3–11 and younger; 10 for ages 4–0 through 9–11; and 10 for ages 10–0 and older)

Diagnostic Algorithm 602ADI \$50.00
(15 for ages 2–0 through 3–11 and 15 for ages 4–0 and older)

Training Package 700ADI \$1725.00

PAL format. 8 videotapes (1 to 3 1/2 hours each), a Guidebook with behavior coding instructions and examples; Interview Booklets and Diagnostic Algorithms needed for training exercises. Worth 18 CE credits.



Autism Diagnostic Observation Schedule (ADOS)*

Catherine Lord, PhD, Michael Rutter, MD FRS,
Pamela C. DiLavore, PhD and Susan Risi, PhD
WPS

Purpose To evaluate almost anyone suspected of having autism

Candidates 2+ years of age

Administration 35–40 minutes per module

Content

The ADOS can be used to evaluate almost anyone suspected of having autism—from toddlers to adults, from children with no speech to adults who are verbally fluent.

This semi-structured assessment consists of various activities that allow you to observe social and communication behaviors related to the diagnosis of pervasive developmental disorders. These activities provide interesting, standard contexts in which interaction can occur.

The ADOS consists of four modules, each requiring just 35 to 40 minutes to administer. The individual

being evaluated is given just one module, depending on his or her expressive language level and chronological age. Following guidance provided in the manual, you select the appropriate module for each person. Module 1 is used with children who do not consistently use phrase speech, Module 2 with those who use phrase speech but are not verbally fluent, Module 3 with fluent children, and Module 4 with fluent adolescents and adults. The one group within the autism spectrum that the ADOS does not address is nonverbal adolescents and adults.

As you administer the ADOS, you record your observations, then code them later and formulate a diagnosis. Cut-off scores are provided for both the broader diagnosis of PDD/atypical autism/autism spectrum as well as the traditional, narrower conceptualization of autism.

Offering standardized materials and ratings, the ADOS gives you a measure of autism spectrum disorder that is unaffected by language. Because it can be used with a wide range of children and adults, it is a cost-effective addition to any hospital, clinic, or school that serves individuals with developmental disorders.

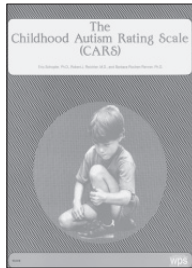
Kit 990ADS \$3095.00
Includes 16 Observation/Coding Booklets (4 for each Module); Manual; Test Materials (more than 85 stimulus items, 12 laminated cartoons, 3 color picture cards); all in a durable plastic container, with handles.

Observation/Coding Booklet 600ADS \$90.00
Please specify Module 1, 2, 3, or 4.

Manual 500ADS \$130.00

Please allow 6–8 weeks for delivery.

Training is available, please contact ACER for further details.



Childhood Autism Rating Scale (CARS)*

*Eric Schopler, PhD,
Robert J Reichler, MD, and
Barbara Rothen Renner, PhD
WPS 1988*

Purpose To identify and classify children with autism

Candidates 2+ years of age

Administration 20–30 minutes – Individual

Features

- Assists in recognising and classifying autistic children
- Provides quantifiable ratings based on direct behaviour observation
- Important element in the systematic diagnosis of autism

Content

The CARS is a 15-item behaviour rating scale that helps to identify children with autism and to distinguish them from developmentally handicapped children who are not autistic. In addition, it distinguishes mild-to-moderate from severe autism.

The CARS includes items drawn from five prominent systems for diagnosing autism. Each item covers a particular characteristic, ability, or behaviour: Relationships with People, Imitation, Affect, Use of Body, Relation to Non-human Objects, Adaptation to Environmental Change, Visual Responsiveness, Auditory Responsiveness, Near Receptor Responsiveness, Anxiety Reaction, Verbal Communication, Nonverbal Communication, Activity Level, Intellectual Functioning, and the clinician's general impression.

The CARS can be used by professionals such as physicians, special educators, school psychologists, speech pathologists, and audiologists.

Brief, convenient, and suitable for use with any child over 2 years of age, the Childhood Autism Rating Scale (CARS) makes it much easier for clinicians and educators to recognize and classify autistic children.

Developed over a 15 year period, with more than 1,500 cases.

The product of long term empirical research, CARS provides quantifiable ratings based on direct behavior observation. These ratings are an important element in the systematic diagnosis of autism.

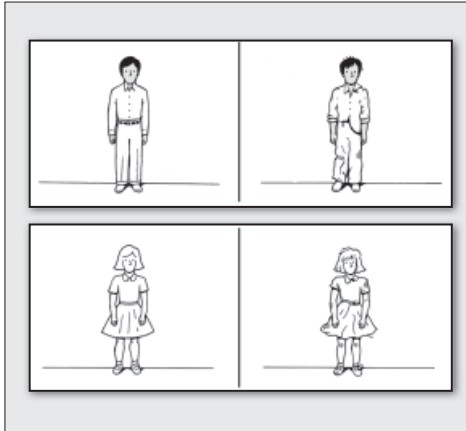
Rating Scales (25) 100CAR \$77.00

Kit 990CAR \$175.00

Includes Manual and 25 Rating Scales



NEW



Joseph Picture Self-Concept Scale*

Jack Joseph, PhD
WPS

Purpose To measure self-concept in children as young as 3

Candidates 3.0–7.11 and 7.0–13.11 years of age

Administration 5–10 minutes – Individual

Content

The Joseph Scale provides a standardized method for assessing self-concept in children younger than 7. The test quickly identifies children whose negative self-appraisals put them at risk for academic and behavioral difficulties.

The Joseph Scale employs a unique administration format that lets youngsters respond using pictures rather than words. Each item asks the child to choose between an illustration representing positive self-concept and another representing negative self-concept. Responding orally or by pointing, the child indicates which of the two illustrated situations happens to him or her most frequently. Because it requires no reading, the Joseph Picture Self-Concept

Scale can be used with virtually all children, including preschoolers and older children who may have developmental problems or language difficulties. Stimulus booklets include picture pairs for both boys and girls.

Separate test forms are provided for younger (3.0 to 7.11) and older (7.0 to 13.11) children. The form for older children includes a response distortion index and items geared specifically to that age group.

It also uses an interactive interview format—though, like the form for younger children, it requires no reading and can be largely nonverbal.

Ideal for busy mental health practitioners, the Joseph Scale blends the precision of a sophisticated clinical assessment instrument with the convenience and efficiency of a screening tool. Completed in just 5 to 10 minutes, it is a quick and cost-effective way to identify children at risk for academic or behavioral problems. The scale can also be used to evaluate psychological and educational interventions, to investigate the relationship between self-concept and other traits and behaviors (e.g., empathy, school readiness, disruptive behavior, depression), and to monitor changes in self-concept over time.

Kit for Younger Children 990JPS \$415.00
Includes Manual, 20 Form Y AutoScore™ Forms,
2 Stimulus Booklets

Kit for Older Children 992JPS \$255.00
Includes Manual, 20 Form O AutoScore™ Forms,
2 Stimulus Booklets

AutoScore™ Forms 600JPS \$85.00
for younger children pk20

AutoScore™ Forms 602JPS \$85.00
for older children pk20

Manual 500JPS \$92.00



NEW

Social Responsiveness Scale (SRS)*

John N. Constantino, MD
WPS

Purpose To measure the severity of autism spectrum symptoms as they occur in natural social settings

Candidates 4–18 years of age

Administration 15–20 minutes – Individual

Content

Completed by a parent or teacher in just 15 to 20 minutes, the SRS provides a clear picture of a child's social impairments, assessing social awareness, social information processing, capacity for reciprocal social communication, social anxiety/avoidance, and autistic preoccupations and traits. It is appropriate for use with children from 4 to 18 years of age.

Sensitive and reliable across a wide range of symptom severity, the SRS can be used as a screener in clinical or educational settings, an aid to clinical diagnosis, or a measure of response to intervention. SRS scores are particularly helpful in identifying Autism, Asperger's Disorder, Pervasive Developmental Disorder Not Otherwise Specified (PDD-NOS), and Schizoid Personality Disorder of Childhood. In addition, the scale can alert clinicians to subthreshold autistic symptoms that may be relevant in evaluating children with a wide variety of psychological problems.

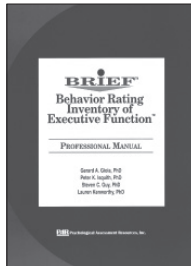
The SRS has a major advantage over other instruments used to assess autism spectrum conditions. Rather than providing a "yes or no" decision about the presence of symptom or disorder, the SRS measures impairment on a quantitative scale across a wide range of severity—consistent with recent research indicating that autism is best conceptualized as a spectrum condition rather than an all-or-nothing diagnosis. For the most common (and often the most subtle) autism spectrum conditions, no previous instrument

has demonstrated the ability to reliably measure the severity of social impairment.

In addition to a Total Score reflecting severity of social deficits in the autism spectrum, the SRS generates scores for five Treatment Subscales: Receptive, Cognitive, Expressive, and Motivational aspects of social behavior; as well as Autistic Preoccupations. These scores are useful in designing and evaluating treatment programs. Standardization is based on a sample of more than 1,600 children (4 through 18 years of age) from the general population. Norms are separated by rater (parent or teacher) and by gender of the child rated.

Brief, quantitative, and based on naturalistic observations of parents and teachers, the SRS can be used in clinical, research, and educational settings. It can help you distinguish the presence of autism from other child psychiatric conditions by identifying the type of social impairment that is characteristic of autism spectrum conditions in children as young as 4 years of age.

Kit	990SRS	\$190.00
<i>Includes Manual, 15 Parent AutoScore™ Forms, 15 Teacher AutoScore™ Forms</i>		
Parent AutoScore™ Form pk25	600SRS	\$80.00
Teacher AutoScore™ Form pk25	601SRS	\$80.00
Manual	500SRS	\$106.00
SRS Scoring CD (25 administrations)	536SW	\$185.00
PC Answer Sheet pk100 (for use with Scoring CD)	603SRS	\$35.00



Behavior Rating Inventory of Executive Function™ (BRIEF™)

Gerard A Gioia, PhD,
Peter K Isquith, PhD,
Steven C Guy, PhD, and
Lauren Kenworthy, PhD
PAR 2000

Purpose To assess impairment of executive function

Candidates 5–18 years of age

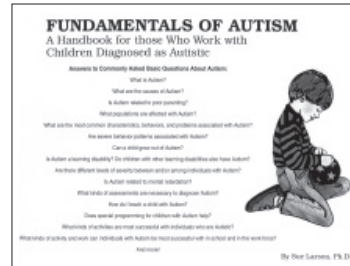
Administration 10–15 minutes – Individual

Content

The BRIEF consists of two rating forms – parent and teacher – designed to assess executive functioning in the home and school environments.

The BRIEF is used to evaluate children with a wide spectrum of developmental and acquired neurological conditions, such as learning disabilities, low birth weight, attention-deficit/hyperactivity disorder, Tourette's disorder, traumatic brain injury, and pervasive developmental disorders/autism.

<i>Professional Manual</i>	500BRE	\$124.00
<i>Parent Form (25)</i>	100BRE	\$103.00
<i>Parent Form Scoring Summary/Profile Form (50)</i>	600BRE	\$69.00
<i>Teacher Form (25)</i>	102BRE	\$103.00
<i>Teacher Form Scoring Summary/Profile Form (50)</i>	602BRE	\$69.00
<i>Introductory Kit</i>	990BRE	\$434.00
<i>Includes Manual, 25 Parent Form, 25 Teacher Form, 50 Parent Form Scoring Summary/Profile Forms and 50 Teacher Form Scoring Summary/Profile Forms.</i>		



Fundamentals of Autism

A Handbook for those Who Work with Children Diagnosed as Autistic

Sue Larson

Slosson Educational Publications, 1998

Purpose To identify program objectives

Candidates Children

Administration Untimed

Content

This Handbook and two accompanying checklists make up a one-of-its-kind package providing a quick, user-friendly, effective, and accurate approach to help in identifying and developing educationally related program objectives for the child diagnosed as autistic. These checklists are specifically designed to first identify behavioural areas of concern typically associated with Autism. Then the Fundamentals of Autism Handbook can be used to provide suggested objective and goal oriented remedial approaches for each listed behavioural area of concern. Approaches which can, in turn, be easily implemented into the child's educational program.

<i>Complete Kit</i>	990FUN	\$155.01
<i>Handbook</i>	500FUN	\$110.00
<i>Interview Observation Checklist (pkg 50)</i>	100FUN	\$65.10
<i>Ratings Checklist (pkg 50)</i>	101FUN	\$65.10



The Autistic Continuum

An assessment and intervention schedule

Maureen Aarons and
Tessa Gittens
NFER-Nelson, 1992

Purpose To provide a framework

Candidates 2–8 years

Administration Untimed

Content

The Autistic Continuum: An Assessment and Intervention Schedule is a revision of *Is This Autism?* incorporating new theories and tasks to bring it totally up to date with current research. It aims to provide a framework for gathering information relevant to the understanding of children with a spectrum of autistic or autistic-like difficulties.

The Autistic Continuum enables the user to decide what to look at, how to interpret the information, and how to use it appropriately, so that teaching or therapy is realistic and relevant to the child's needs. In addition the photocopiable Schedule in the Manual may be used to monitor progress and changes as the child develops.

The Schedule is not a diagnostic tool but instead provides a comprehensive framework for assessment and intervention. The Manual is a practical guide to the administration of the schedule, and also gives further details of the wider implications of specific behaviours. The Autistic Continuum will prove invaluable to those professionals who have no specific training in autism but whose work may bring them into contact with autistic children.

Manual 990LE \$236.50



Autism

A social skills approach for children and adolescents

Maureen Aarons and
Tessa Gittens
Winslow, 1998

Purpose To provide program ideas

Candidates Children and young adults

Administration Untimed

Features

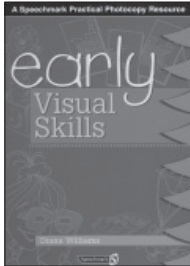
- Assessment
- Setting the scene for intervention
- Pre and primary school intervention
- Intervention with older children & adolescents

Content

Autism is an excellent source of practical ideas on which to base programmes of intervention for children and young people with autism. It is primarily aimed at those working with children who have normal, or near normal, cognitive abilities.

The authors approach remediation from the standpoint that a disorder affecting social functioning should be remediated through approaches which focus on these areas. Much can be achieved when children with autism have access to a social skills programme and this book will help all practitioners offer their students the opportunity to enhance their quality of life.

805BK \$102.75



Early Visual Skills

Diana Williams
Winslow, 1999

Purpose To offer appropriate tasks

Candidates Children

Administration Untimed

Features

- Look & Learn
- Let's Look Together
- Visual Sorting
- Complex Visual Discrimination
- Holiday Projects
- Look at Me
- Looking & Following
- Visual Matching
- Visual Sequencing
- Visual Memory and Concentration
- Visual Skills in the School Curriculum

Content

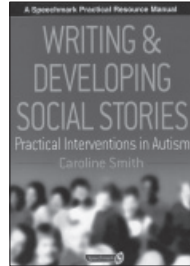
Every practitioner working with children who have underdeveloped visual perception skills associated with language delay or other communication difficulty, will welcome this practical photocopyable manual.

The majority of the activities are non-verbal and therefore suitable for children with limited spoken language including deaf, sensory impaired or those with autism or learning difficulties.

Offers visual perception tasks designed to help develop specific concepts such as colour, size and shape, which can also form part of an attention training programme.

803BK

\$142.35



Writing and Developing Social Stories

Practical Interventions in Autism

Caroline Smith
Speechmark 2003

Purpose To offer practical events

Candidates Children and young adults

Administration Untimed

Features

- Introduction
- Writing a social story
- Sample stories
- Delivering training about social stories

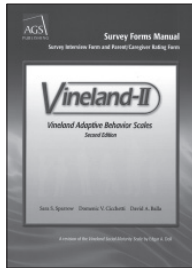
Content

This practical resource provides an introduction to the theory and practice of writing social stories. In addition, there are examples of successful stories to use as guides, as well as information and photocopyable resources for delivering training on the use of social stories. Social stories are short stories intended for children with autism to help them understand their social world and behave appropriately within it.

The stories:

- Provide clear, concise and accurate information about what is happening in a specific situation, outlining both why it is happening and what a typical response might be
- Are written by those directly supporting a child with autism and only successful stories are included in the book
- Are infinitely flexible and adaptable to an individual child in an individual social situation
- Cover children aged 3 to 16

0863884326 \$93.20



Vineland Adaptive Behavior Scales, Second Edition (Vineland-II)

Sara S Sparrow, PhD,
Domenic V Cicchetti, PhD
and David A Balla
AGS 2005

Purpose To measure adaptive and maladaptive behaviour

Candidates Survey Interview Form; Parent/ Caregiver Rating Form; Expanded Interview Form: 0–89 years of age, Teacher Rating Form: 3–21: 11 years of age

Administration 20–60 minutes – Individual

Features

- New Parent/Caregiver Rating Form and new norms, expanded age range, and improved items
- Addresses today's special needs populations, such as individuals with mental retardation, autism spectrum disorder, and ADHD
- Updated content
- Semistructured interview format focuses discussion and gathers in-depth clinical information

Content

The Vineland-II measures personal and social skills used for everyday living. Psychologists and other professionals use it to identify individuals who have mental retardation, developmental delays, brain injuries, and other impairments.

The Vineland-II consists of four forms:

- Survey Interview – administered to a parent or caregiver in a semistructured interview format
- Parent/Caregiver Rating Form – covers the same content as the Survey Interview in a rating scale format

- Expanded Interview – administered in a semistructured interview format; designed to provide a more comprehensive assessment. **AVAILABLE 2006.**

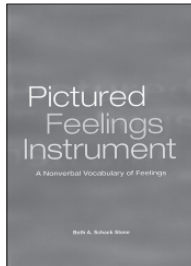
- Teacher Rating Form **AVAILABLE LATE 2006.**

Vineland-II analyses skills and behaviours in four domains:

- Communication
- Socialisation
- Daily Living Skills
- Motor Skill

Vineland-II is useful for diagnosis, qualification for special programs, progress reporting, program and treatment planning, and research.

<i>Survey Manual</i>	503XJ	\$216.00
<i>Survey Forms Record Booklets (25)</i>	608XJ	\$156.00
<i>Parent/Caregiver Rating Forms (25)</i>	610XJ	\$156.00
<i>Survey Forms Report to Caregivers (25)</i>	617XJ	\$63.00
<i>Survey Forms Report to Parents (25)</i>	609XJ	\$63.00
<i>Survey Forms Starter Set</i>	004XJ	\$300.00
<i>Includes Survey Manual, 10 Survey Interview Record Booklets, 10 Parent/Caregiver Rating Forms, 10 Survey Forms Report to Caregiver and 10 Survey Forms Report to Parents</i>		
<i>Expanded Form Manual</i>	504XJ	\$216.00
<i>Expanded Forms Record Booklets (25)</i>	611XJ	\$156.00
<i>Expanded Forms Report to Parents (25)</i>	612XJ	\$63.00
<i>Summary & Planning Report (25)</i>	613XJ	\$96.00
<i>Form Package</i>	614XJ	\$240.00
<i>Includes 25 Summary & Planning Reports, 25 Expanded Forms Report to Parents</i>		
<i>Starter Set</i>	005XJ	\$360.00
<i>Includes Expanded Form Manual, 10 Expanded Forms Record Booklets, 10 Expanded Forms Report to Parents and 10 Summary & Planning Reports</i>		
<i>Teacher Rating Form Manual</i>	505XJ	\$168.00
<i>Teacher Rating Forms (25)</i>	615XJ	\$145.00
<i>Teacher Rating Form Report to Parents (25)</i>	616XJ	\$63.00
<i>Teacher Rating Form Starter Set</i>	006XJ	\$220.00
<i>Includes Manual, 10 Teacher Rating Forms and 10 Report to Parents</i>		



Pictured Feelings Instrument (PFI)

Beth A Schack Stone
ACER 2004

Purpose To identify and communicate feelings through a nonverbal vocabulary

Candidates 5–65+ years of age

Administration Untimed – Individual and group

Features

- Validated nonverbal communication instrument that covers a broad range of feelings
- Helps overcome communication boundaries of culture, education, age and abilities

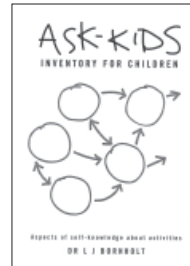
Content

The PFI consists of a set of 26 cards with line drawings of facial and body expressions, which provide a validated nonverbal vocabulary of feelings. The cards illustrate 26 specific feelings, such as happy, sad, loving, angry and confused.

Each picture was created to be specific as to the feelings expressed but ambiguous as to age, gender or ethnicity, so as to apply to a broad population. This instrument provides a flexible and standardised way to enable people to access, identify and communicate.

The comprehensive manual includes seven photocopiable interview/answer forms designed to address specific issues (eg body image, events, relationships). The PFI is meant for use in clinical/counselling practice, assessment, emotion recognition testing, education/training and research.

Manual	0864316356	\$99.95
Cards (Set of 26)	0864316437	\$24.95
Kit	0864316518	\$119.95
Includes Manual and Cards		



Ask-Kids

Inventory of self-knowledge about activities

Dr Laurel Bornholt
ACER Press 2005

Purpose To provide profiles of children's self-concepts

Candidates 4–12 years of age

Administration 15 minutes – Individual or group

Content

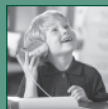
The ASK-KIDS Inventory for Children provides profiles of children's self-concepts. A wide range of professionals can administer the ASK-KIDS profiles, including counsellors, clinicians, educators, psychologists, health professionals and social workers. ASK-KIDS is also useful for researchers working with children in clinical, community and education settings.

ASK-KIDS is a unique and engaging self-concept inventory for children of pre-school and school-age. Children from 4 to 12 years old can complete ASK-KIDS in about 15 minutes. It is appropriate for children across gender, ability, home language and socio-economic groups.

ASK-KIDS includes ten reliable self-concepts about reading, number, drawing, friends, communication, individuality, belonging, movement, body and appearance. Simple diagrams of the activities provide a frame of reference for each self-concept. Children respond to five direct questions for each self-concept using a simple dot-point scale. The materials are designed so that ASK-KIDS can be extended to other activities.

ASK-KIDS Manual	0864317395	\$69.95
ASK-KIDS Test Booklet (package of 10)	0864317476	\$29.95

Qualifications Form



Qualifications

ACER tests are professionally developed assessment instruments that require specialised training to ensure their appropriate, ethical use.

Eligibility to purchase these tests, therefore, is restricted to individuals with specific training and experience in a relevant area of assessment.

In order to purchase the restricted assessment tools in this catalogue you will need to register your qualifications with **ACER**.

The assessments presented in this publication require a **(S)** - Specialist qualification level.

(S) – Specialist

Available to professionals with accredited training in psychology, health sciences, counselling, education, medicine and other specialist areas.

Note: **(S)** qualified users may only purchase **(S)** tests from within their specialisation area.

Contact details

Title _____

First Name _____

Surname _____

Position/Job Title _____

Organisation _____

Delivery Address _____

Suburb _____ State ____ Postcode ____

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Fax () _____

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☐ Please tick if you do not wish to receive any marketing or promotional materials from ACER.

I would like to apply for registration with ACER at Specialist level.

Educational background

> Please indicate highest qualifications.

■ Degree or diploma _____

■ Major area of study _____

■ Institution _____

■ Year conferred _____

> Attach a copy of accredited course certificates.

Previous experience in the use of tests and tests used

■ _____

■ _____

Rights and responsibilities

The user named above agrees to adhere to the following conditions:

■ I certify that the above is a correct statement of my qualifications and experience in the use of tests.

■ I agree that my use of all tests obtained from ACER will be in accordance with relevant legislation in the state(s) in which I am practising, and with the conditions under which tests are supplied as set out in the current ACER catalogues.

■ I will strictly abide by copyright laws and will not reproduce or alter copyrighted materials, nor permit use by unauthorised persons.

■ I will maintain the confidentiality of all assessment results.

■ I will employ and score assessment procedures precisely according to instructions in the relevant test manual.

■ I will release results only to authorised persons according to professional standards for psychological assessment and Australian privacy legislation.

■ I will advise ACER if I change my place of employment to ensure continuing integrity of test purchases.

Please sign, date and return to ACER Customer Service.

> User's signature indicates compliance with the above conditions.

Signature _____

Date _____