

**Order form: *Test and Improve***

Thank you for choosing *Test and Improve*, a NCV aligned diagnostic assessment programme developed by Pearson for South African TVET (FET) Colleges.

Price: R108.30 per test (VAT incl)

|  |  |
| --- | --- |
| **A. College details** | |
| College name |  |
| CEO/ Deputy CEO name |  |
| Tel. |  |
| Fax |  |
| Email |  |
| Physical address (where tests  will be delivered and collected) |  |
| Postal address |  |

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| --- | --- | --- | --- |
| **B. Payment details** | | | |
| Name of official to address invoice to |  | | |
| Designation |  | | |
| Tel. |  | | |
| Email |  | | |
| Method of payment | EFT | Cheque | Cash |

|  |  |
| --- | --- |
| **C. Test details**  *Fill in the required number of tests in the relevant blocks.* | |
| ***Mathematical Literacy*** | |
| NCV level 2 |  |
| NCV level 3 |  |
| NCV level 4 |  |
| ***Mathematics*** | |
| NCV level 2 |  |

# Scan and email the completed contact sheet [to test-and-improve@pearson.com](mailto:test-and-improve@pearson.com)



|  |  |  |
| --- | --- | --- |
| NCV level 3 |  | |
| NCV level 4 |  | |
| ***English*** |  | |
| Level 2 |  | |
| Level 3 |  | |
| Level 4 |  | |
| **Total number of tests** |  | |
| Total cost (at R108.30 per  test, VAT incl): invoiced to college |  | |
| **Total handling fee for the**  **College** |  | |
| Please indicate the most  suitable date(s) for testing |  | |
| Which reports would you like to receive?  *Please tick the appropriate block.* | **Individual learner-level**  **reports** | **Level specific reports** |
| **Class-level reports**  (Students across multiple classes required to complete test) | **College-level reports**  (Students across multiple campuses required to complete test) |
| How should the reports be  delivered?  *Please tick the appropriate block.* | Hard-copy reports couriered | Reports emailed |

|  |  |  |
| --- | --- | --- |
| **Register to enter the Test and Improve competition**  *Please tick the appropriate block.* | Yes | No |

## Declaration

I ......................................................................... (full name and surname) hereby state

under oath that information provided above is accurate and I agree to make a full payment of the amount of money as determined by Pearson three weeks prior to the date of testing.

## Signatures:

Candidate: .....................................................................................................................

Date: ............................................................................................................................. Official responsible for payment/s: .................................................................................... Date: ............................................................................................................................

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