

School Perceptions

Online Survey Registration Form

Step 1: Contact Information

Name of School or School District:			
Contact Name:	Position:		
Phone:	Email:		
Mailing Address including City, State & ZIP:			

Step 2: Survey Information

Survey Name: Technology Professional Practices Inventory			
Number of People to Survey		Survey Dates	
Stakeholder Group	Number of people	Proposed Start Date:	
Number of Teachers		Proposed End Date:	
		Customization: (circle one)	
		Will use base survey as written	
		Will use base survey plus additional questions (\$250 fee)	
		Will use a custom set of questions (\$750 fee)	
		Other – please call (262-644-4300)	
Total number of people:			

Step 3: Payment Information

Cost of Survey		Payment information	
Item	Cost	Purchase Order Number:	
Registration fee	\$300		
Per teacher fee (\$3 each)		Billing Address: (if different from address above)	
Customization fee			
Total cost of survey:		Service Agency:	

Step 4: Fax this form to (262) 364-2717

For more information
call *School Perceptions*
(262) 644-4300