

## EDP Assessment Check-out Contract

Student Name: \_\_\_\_\_ Date: \_\_\_\_\_

Banner ID:@ \_\_\_\_\_ Phone Number: \_\_\_\_\_

Student E-mail: \_\_\_\_\_

This represents a professional agreement between you, the student, and the Department of Educational Psychology. The purpose of this document is to allow you, as a student, the opportunity to check-out psychological assessment materials under the following conditions and with the outlined understandings and responsibilities. By initialing each statement and signing below you agree to the following:

- I. I understand the legal and ethical requirements of each assessment I am checking out, including the process of administering the assessment as required by my course and instrument protocol. \_\_\_\_\_ (initial)
  
- II. I understand that I am solely responsible for keeping the assessment materials in good condition. If an assessment is damaged while in my possession, then I am fully responsible for paying to replace the damaged materials or a hold will be placed on my academic account until payment is received by the Department of Educational Psychology. \_\_\_\_\_ (initial)

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
EDP Staff Signature

\_\_\_\_\_  
Date