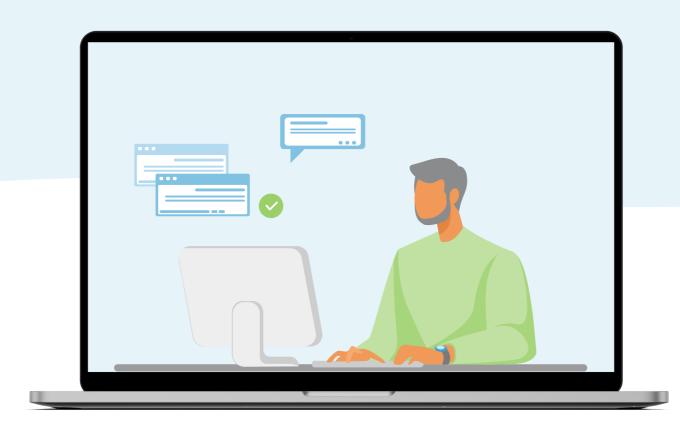




Online Testing Order Form



Forms E, F, & G

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2025 *Iowa Assessments*™ Online Order Form



Date		
Date		

Payment Information	
Payment Information	
Please enclose a check or valid purchase order payable to "Riverside Insights" with all orders. If payment via credit card, mark the box below so an email with payment link can be sent to the email provided in the "Charge to:" section.	NOTE: Orders from first time purchasers require a completed Test Purchaser Qualification Form. Professional Credentials — Choose One: Test Purchaser Qualification Form attached Test Purchaser Qualification Form on file at Riverside Insights
Purchase Order enclosed. Number Che	eck enclosed. Number Credit Card payment.
Charge to (See note above)	
	State ZIP
Required Information (Your order will not be processed without	this information)
Please describe yourself: System/District Diocese/Archdiocese Building/School Public Catholic Private CHECK ONE: School School School Anticipated Testing Date: Reporting options: Web Reports ONLY To ensure delivery of your email notifications, please whitelist the email address: no-reply@dm.riverside-insights.com.	Administration Mode: Online administration System Requirements: 1. Do the workstations that will be used for online testing meet the DataManager minimum system requirements? See datamanagerinfo.com for a copy of the revised system requirements or ask your Assessment Consultant. Yes No 2. Have you run the DataManager online system checker successfully on each workstation that will be used for online testing? (The System Check is accessed from the following URL: https://tinyurl.com/DataManagerCheckReadiness) Yes No
Account Holder (Please list the primary contact who will be the test administrator owner and <i>DataManager</i> Account Holder.) Note: this person is the primary test and IT contact and implementation manager.	Data Contact (if different from Account Holder) Note: this person will be responsible for providing school system data files to Riverside Insights.
Name Position Organization Shipping Address City	Name Position Organization Shipping Address City
State ZIP Phone () Fax () Email Address* (REQUIRED)	State ZIP Phone () Fax () Email Address* (REQUIRED)

Prices are valid until December 31, 2025 and are subject to change without notice.





Availability of National Percentile Ranks (NPR) for Complete/Core Administrations for Grades K and 1

Grade Level	Fall	Midyear	Spring
Grade K	Not Available	Level 5 Not Available for Level 6	Level 5 Level 6
Grade 1	Not Available for Level 7 Complete/Core Level 6	Level 7	Level 7

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				 4-

Price per student,	Fori	m E	For	m F	For	m G	Total	Deigo	Tota
per administration	Item No.	Quantity	Item No.	Quantity	Item No.	Quantity	Quantity	Price	Price
Levels 5–14	1525779		1578139		1738615			\$16.90	
Check here if all licenses	are intended fo	or use in the	2024–2025	school year ((July 1, 2024	through Jun	e 30, 2025)		
						_	,		
Check here if all licenses	are intended for	or use in the	2025-2026	school year ((JUIV I, 2025	tillough Jul	IE 30, 2026)		
Check here if all licenses						_		ear below:	
Check here if all licenses Check here if licenses wi						_		ear below:	
	ll be used in bo	th school ye	ars. Indicate		of licenses to	be allocated	d by school y		
Check here if licenses wi	ll be used in bo	th school year	ars. Indicate Form E:	the quantity o	of licenses to	be allocated	d by school y	orm G:——	
Check here if licenses wi	ll be used in bo	th school year	ars. Indicate Form E:	the quantity o	of licenses to	be allocated	d by school y	orm G:——	
Check here if licenses wi	ll be used in bo	th school year	ars. Indicate Form E:	the quantity o	of licenses to	be allocated	d by school y	orm G: ——	
Check here if licenses wind 2024–2025 scho 2025–2026 scho	ll be used in bo	th school year 4–6/30/202 25–6/30/202 Form E	ars. Indicate Form E:	the quantity o	Form F	be allocated	d by school y	orm G:——	Tota Price

Check here if all licenses are intended for use in the **2025–2026 school year** (July 1, 2025 through June 30, 2026)

Check here if licenses will be used in both school years. Indicate the quantity of licenses to be allocated by school year below:

2024–2025 school year, **7/1/2024–6/30/2025** Form E: ___

2025–2026 school year, 7/1/2025–6/30/2026 Form E: ____ __ Form F: _

Price per student,	For	m E	For	m F	For	m G	Total	Duine	Total
per administration	Item No.	Quantity	Item No.	Quantity	Item No.	Quantity	Quantity	Price	Price
Levels 7–14	1525780		1578358		1738616			\$16.90	
Check here if all licenses a Check here if all licenses a Check here if licenses will	are intended f	or use in the	2025–2026	school year	(July 1, 2025	through Jun	e 30, 2026)		
2024–2025 schoo	l year, 7/1/202	24–6/30/202	P.5 Form E:		Form	ı F:	F	orm G:	
2025-2026 schoo	l year, 7/1/202	25–6/30/202	26 Form E:		Form	ı F:	F	orm G:	

Price per student,	For	m E	For	m F	Total	Duine	Total
per administration	Item No.	Quantity	Item No.	Quantity	Quantity	Price	Price
Levels 15–17/18	1525790		1578364			\$16.90	

	Check here if al	l licenses are	intended for	r use in the	2024–2025	school year	(July 1	, 2024 through	ı June 30,	2025

Check here if all licenses are intended for use in the 2025–2026 school year (July 1, 2025 through June 30, 2026)

Check here if licenses will be used in both school years. Indicate the quantity of licenses to be allocated by school year below:

2024–2025 school year, 7/1/2024–6/30/2025 Form E: ____

2025–2026 school year, 7/1/2025–6/30/2026 Form E: ____ _____ Form F: ___

Districts will be responsible for any overages and will be billed accordingly.

Prices are valid until December 31, 2025 and are subject to change without notice.





Online Testing - Iowa Assessments Forms E, F, & G

Districts will be responsible for any overages and will be billed accordingly.

Survey

Price per student,	For	m E	For	m F	For	m G	Total	Duine	Tota
per administration	Item No.	Quantity	Item No.	Quantity	Item No.	Quantity	Quantity	Price	Price
Levels 7–14	1525797		1578367		1738617			\$15.65	
Check here if all licenses				-		_			
Check here if all licenses	s are intended f	or use in the	2025–2026	school year	(July 1, 2025	through Jun	e 30, 2026)		
Check here if all licenses Check here if licenses w	s are intended for ill be used in bo	or use in the oth school ye	2025–2026 ars. Indicate	school year the quantity	(July 1, 2025 of licenses to	through Jun	e 30, 2026) d by school y		
Check here if all licenses	s are intended for ill be used in bo	or use in the oth school ye	2025–2026 ars. Indicate	school year the quantity	(July 1, 2025 of licenses to	through Jun	e 30, 2026) d by school y	rear below: orm G:	

TRAINING

To explore training options for this assessment, please consult the separate K–12 Training order form or contact your local Assessment Consultant or Riverside Customer Service.

How to Place Your Order

Inquiries may be directed to: inquiry@riversideinsights.com

For more information, including our W-9 form, please visit our Help and Support page on our website at riversideinsights.com/support.

Note: To ensure adequate processing time when submitting an expedited RUSH order, please email your order to orders@service.riversideinsights.com with URGENT in the Subject Line of the email.

Via email: orders@service.riversideinsights.com

Via mail: Customer Service Riverside Insights One Pierce Place, Suite 900W Itasca, IL 60143

Product Order Subtotal	
State Sales Tax	
Order Total	

Prices are valid until December 31, 2025 and are subject to change without notice.

All orders will be filled at prices in effect upon receipt of your order.

To obtain the most up to date pricing, please visit us online at www.riversideinsights.com.