

Please return via fax to Marketing Communications  
Fax: 210-339-5055 • Phone: 210-339-5378

## Harcourt Experience Communication Form

**Name:**  
**Title:**  
**Organization:**  
**Street Address:**  
**City/State/Zip Code:**  
**E-mail Address:**  
**Telephone Number:**

Regarding your Harcourt Assessment Service-Related Experience  
(i.e. Customer Service or Scoring):

Was there a particular individual or team that you would like to comment on?      YES      NO  
If yes, please list.

Please tell us about your experience.

Would you recommend us to a colleague?      YES      NO

### Agreement to Quote Testimonial

The undersigned irrevocably authorizes Harcourt Assessment, Inc. to use the above written endorsement/testimonial statement, with or without my name, in the advertising and promotion of its products and services in all forms or media now or hereafter known, without further consent from or compensation to me.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**Please print this form before signing.**

Thank you for taking the time to share your experiences with us.  
We greatly value all the feedback provided by our customers.