



ACT® Special Testing TIR Order Form—April 2021

This service is available to examinees who registered for the April test date AND tested through ACT Special Testing during the designated Special Testing Window in the US, US Territories, and Puerto Rico.

You may request to receive the TIR service in the standard digital format, accessible online via your ACT Student Account as well as any alternate formats you were approved to test with. To request this service, complete and sign this order form, then mail the form, with payment, by the postmark deadline. Processing for your request will begin once your score report is released, and TIR service can take up to 7 weeks for the alternate formats to be mailed. You cannot expect to receive the materials in time to study for the next test date.

Test Date: April 2021	Mail to: ACT Test Information Release PO Box 4008 Iowa City, IA 52243-4008 USA	Fee: \$25.00. Payment* is by check or money order payable to ACT only .
Postmark Deadline: October 18, 2021		

Approved Alternate Format(s) Requested:

- | | | |
|--|---|--|
| <input type="checkbox"/> Standard Digital Format <i>Only</i> | <input type="checkbox"/> Braille EBAE | <input type="checkbox"/> Reader’s Script |
| <input type="checkbox"/> Large Print | <input type="checkbox"/> Braille UEB with Nemeth | <input type="checkbox"/> Raised Line Drawing |
| <input type="checkbox"/> Audio USB | <input type="checkbox"/> Braille UEB without Nemeth | <input type="checkbox"/> Screen Reader |

Notes:

- If your request includes unapproved alternate formats, only the approved alternate format(s) selected will be fulfilled. If no approved alternate format(s) are selected, the standard format will be sent.
- If, for any reason, we have to replace the test version scheduled for use at your test center, this offer becomes void, and we will refund your fee for this service.
- Customers will be charged applicable state and local sales taxes where required. A list of states where ACT is registered to collect and remit sales tax can be found at www.act.org/orderinfo. If required, calculate appropriate sales tax based on your shipping address and add to the order total. If you are exempt from sales tax, appropriate documentation must be received by ACT before tax-exempt status will be granted.

PLEASE PRINT

Name of Examinee (as given when the ACT test was taken) Date of Birth

Street Address

City State/Province ZIP/Postal Code

ACT ID Telephone Number

Location of test center where the ACT test was taken

I understand that by signing below, I consent to the ACT Privacy Policy (www.act.org/privacy.html) which is incorporated into this form by reference, including consent to the collection of personally identifying information and its subsequent use and disclosure.

LEGAL SIGNATURE of the examinee

* Payment must be made in US dollars drawn on a US or US affiliate bank. This is notification that when you pay by check you are authorizing ACT, Inc., to convert your check to an electronic entry. When we use this information from your check to make an electronic funds transfer, funds may be withdrawn from your account as soon as the same day you make your payment, and you will not receive your check back from your financial institution. If your check is returned to us due to insufficient or uncollected funds, it may be re-presented electronically and your account will be debited.

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