



Psytech SA Bureau Service Order Form

Psytech South Africa (Pty) Ltd
176 Barry Hertzog Ave, Greenside, 2193
PO Box 85401, Emmarentia 2029
Tel: 011 646 7010 Fax: 011 646 7011
www.psytech.co.za info@psytech.co.za

Full Company Name:	Psychology Professional Name:
Company Account Number:	HPCSA Registration Number:
Cellphone Number:	Fax Number:
Email address where report is to be sent:	

Declaration by psychology professional:

I hereby take full professional responsibility for the reports requested on this form, in terms of the appropriate legislation, HPCSA regulations and ethical code. By signing this order form I confirm that I have read and accepted Psytech SA's terms and conditions. If you would like to review the terms and conditions please contact Psytech SA at (011)646-7010 or info@psytech.co.za.

Signature: _____

Date: _____

Details of reports requested:

Candidate name	Tests	Norm group	Report required
Special Instructions:			

Candidate name	Tests	Norm group	Report required
Special Instructions:			

Candidate name	Tests	Norm group	Report required
Special Instructions:			

NB: Order forms which do not include a signature and date will not be processed



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Same day service required? _____

Please note that no bureau service will be provided without the signature of the registered psychology professional.

Psytech SA Banking Details:

Our banking details are:

Bank: Standard Bank
Branch: Parktown
Account Number: 401938174
Branch code: 00-03-55
Account Type: Current

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