



TPP Class Roster Submittal Order Form

This form is to be filled out if you, as a professor, would like your students to order specific material from Pearson for a course you are teaching. Once this form is submitted and approved your students will receive a 40% discount on only the items you specify below. Once you have received approval please have your students fill out the Student TPP Order Form. Please note, this form is only to be used by TPP members. To apply to become a TPP member please visit www.pearsonclinical.com/TPP and fill out the [membership application](#).

**Please fill out this form in its entirety and fax to 1-800-232-1223 Attn: TPP Team
Or email to clinicalcustomersupport@pearson.com**

Professor/Class Information		
Professor's Name:		
University:		
Department:		
Course(s) Material will be used in:		
Year/Semester:		
Phone Number:		
Email Address		
Products Requested		
Please list the products you would like your students to order below:		
ISBN/Product Number:	Description:	List Price:
Student Roster		
Terms & Conditions		

I certify that the students listed above will be using this material under my supervision. I am aware that the students listed above will receive the 40% TPP Student discount and that the materials are to be used for educational purposes.

Signature: _____ Date: _____