



COLLABORATIVE  
ACADEMIC  
TESTING  
SERVICE, P.A.

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## Request for Copy of Prior Year's CATS Evaluation Results

(Please print all answers except for the Signature)

Child's Name: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Approximate Date of Report: \_\_\_\_\_

Parent/Legal Guardian Name(s): \_\_\_\_\_

Phone Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

I request that Collaborative Academic Testing Service, P.A. provide a copy of the Parent Report for the CATS Evaluation from a prior year and email /mail to the following address. A processing fee will apply\*.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_

Date: \_\_\_\_\_

### Processing Fee Structure

1. Report from past two school years: \$15
2. Report older than two school years: \$25

Please complete this form, including signature and date, and email to [admin@catstexas.com](mailto:admin@catstexas.com). An invoice will be sent to you by email for the fees due.

