

Your form has been submitted. Please contact [contracts@avid.org](mailto:contracts@avid.org) if you'd like to make edits to this page.

## Agreement Request Form

Welcome to the 2018-19 AVID Agreement Request Form.

The information you enter here will be used to generate an AVID College Readiness System Services and Products Agreement for your school system for the 2018-19 school year.

For any inquiries regarding the Agreement Request Form, please contact your AVID Division representative.



### Important Notes Prior to Filling out the Agreement Request Form:

- Before exiting the Agreement Request Form, or if you are going to step away from your computer for a period of time, please ensure that you click on the "Save Agreement Request" button at the bottom of the webpage. Exiting the webpage will cause you to lose any unsaved data.
- If you are experiencing issues with the Agreement Request Form, please try using another Internet Browser (i.e. Google Chrome, FireFox, Internet Explorer, etc.)
- \* Starred fields are mandatory.
- If you hover over a "?" with your cursor, it will display a ToolTip with information pertaining to that specific field.

### District Contact Information

|                       |   |
|-----------------------|---|
| *Legal Name of Entity | ? |
| Preferred Name        | ? |
| Website               | ? |

### Address Information

\*Street

---

\*City

---

\*State/Province

---

\*Zip/Postal Code

---

---

## Contract Contact Information

\*First Name

---

\*Last Name

---

Salutation

---

\*Title

---

\*Telephone

---

Fax

---

\*Email

---

### Address Information:

Street

---

City

---

State/Province

---

Zip/Postal Code

---



### District Director

?

District Director Selection

---

\*First Name

---

\*Last Name

---

Salutation

---

\*Title

---

\*Telephone

---

Fax

---

\*Email

---

Address Information:

Street

---

City

---

State/Province

---

Zip/Postal Code

---

Co-District Directors:

+ ADD CO-DISTRICT DIRECTOR

Billing Contact Information

?

Billing Contact Selection

---



\*First Name

---

\*Last Name

---

Salutation

---

\*Title

---

\*Telephone

---

Fax

---

\*Email

---

Address Information:

Street

---

City

---

State/Province

---

Zip/Postal Code

---

Additional Contacts

?

Additional Contact 1

Tareyton Russ

EDIT

DELETE

+ ADD ADDITIONAL CONTACT

## Site(s) Information

NOTE: Be sure to click on the Edit button by each contract site to verify or update the information.

- **Existing Secondary Sites:** Sites that are renewing will automatically have AVID Weekly selected. AVID Center highly recommends each site purchase this subscription. If the district/site wishes to opt out, please make sure to deselect this product.
- **New Secondary Sites** will receive AVID Weekly with the purchase of the Secondary Library.
- **New/Existing Elementary Sites** will always receive AVID Weekly with their Membership.
- AVID Weekly access codes will be sent to the Principal of each participating site for distribution.

## Agreement Sites

|      | Contract Site Name                           | Elementary | Secondary | SI Quantity | Elem AVID Weekly | S  |
|------|--|------------|-----------|-------------|------------------|----|
| Edit | <a href="#">American Indian Public CS HS</a> |            | New       | 8           | No               | lr |
| Edit | <a href="#">American Indian Public CS II</a> |            | New       | 8           | No               | lr |

+ ADD NEW SITES

## Additional Comments

Please change the name of the school sites: American Indian Public High School and American Indian Public Charter I& II.



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SAVE AGREEMENT REQUEST

SUBMIT TO AVID CENTER