



NEW ACCOUNT INFORMATION FORM

LEGAL NAME OF ORGANIZATION

ORGANIZATIONAL STRUCTURE

NON-PROFIT

CORPORATION

PARTNERSHIP

PROPRIETORSHIP

TYPE OF ORGANIZATION

HIGH SCHOOL

JATC PRE-APPRENTICESHIP

TECHNICAL COLLEGE

VEEP

MAILING STREET ADDRESS

CITY

STATE

ZIP

BILLING STREET ADDRESS

CITY

STATE

ZIP

ACCOUNTS PAYABLE NAME

EMAIL

PH.

PROGRAM ADMINISTRATOR NAME

ADMINISTRATOR PH.*

ADMIN. EMAIL*

Please note:

1. Purchase order numbers are required to place any orders. For your convenience we can provide a fillable PDF form for those who need an estimated cost letter to obtain purchase orders in advance of placing orders. The form can be located on our info.interimcredentials.com website under SCHOOL RESOURCES.
2. Please complete this form and email it to Audra Kellams @ ak@etalliance.org.
3. It is the administrator's responsibility to ensure paperwork is submitted in a timely manner.
4. The creation of new accounts will require turnaround time, but we do our best to do so as quickly as possible.

(*Designated program administrator is responsible for: setting up accounts once access is provided, rostering and enrolling teachers and students, placing orders, assigning licenses and access tokens, managing bookstore invoicing, and ensuring users have account access.)