

Academic Site License Application

Educational Institution: _____

Department: _____

Mailing Address: _____

Shipping Address: _____

Contact: _____ Email Address: _____

Telephone Number: _____ Fax Number: _____

- New Site License Application**
- Renewal Application**

- Using Educational Publishers Materials**
- Creating Own Materials**

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Authorizing Representative

Print Name: _____ Date: _____
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Academic License Agreement

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