



# Documentation Project

## **School Information Form & License Agreement Submission Checklist**

Version 2

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### **Intended Audience**

SWIS™ Facilitators use the School Information Form (SIF) and License Agreement Submission Checklist to ensure that the information entered into the SIF and into page 6 of the License agreement are complete.

### **Description**

The School Information Form and License Agreement Submission Checklist is designed to assist SWIS™ Facilitators in the process of completing the paperwork required for a school to begin using SWIS™. The form identifies the information that must be included on the SIF and page 6 of the License Agreement prior to the submission of the documents to the University of Oregon.



## School Information Form & License Agreement Submission Checklist

School \_\_\_\_\_

Date \_\_\_\_\_

*Check the boxes below as you prepare the School Information Form and License Agreement.*

*All items in **BOLD** are required for setting up a SWIS™ Account.*

Section 1: School Information Form Required Categories	
<input type="checkbox"/> <b>Country:</b>	<input type="checkbox"/> <b>State/Province:</b>
<input type="checkbox"/> <b>District:</b>	<input type="checkbox"/> <b>Date</b>
<input type="checkbox"/> <b>School name:</b>	<input type="checkbox"/> <b>Full Address (Street, city, state, zip/postal code)</b>
<input type="checkbox"/> <b>School phone and fax</b>	<input type="checkbox"/> <b>Mailing Address (if different from full address)</b>
<input type="checkbox"/> <b>Grade levels at school are checked</b>	<input type="checkbox"/> <b>School or School District website URL</b>
<input type="checkbox"/> <b>Administrator Name, Phone, &amp; Email</b>	
Section 2: Personnel & Password Information	
<input type="checkbox"/> <b>SWIS™ Login name</b>	<input type="checkbox"/> <b>Contact Person/SWIS™ User's Name, Phone, Email</b>
<input type="checkbox"/> <b>SWIS™ User #2 Name, Phone, Email</b>	<input type="checkbox"/> <b>SWIS™ User #3 Name, Phone, Email</b>
<input type="checkbox"/> <b>Passwords (in correct format) for all SWIS™ Users</b> e.g., aaa2bbb, ABC6DEF	<input type="checkbox"/> <b>Read-Only Password</b> e.g., aaa2bbb, ABC6DEF
Section 3 & 4: Facilitator & Support	
<input type="checkbox"/> <b>Facilitator Name, Phone, Email</b>	<input type="checkbox"/> <b>Facilitator Signature, Date</b>
<input type="checkbox"/> <b>Swift at SWIS™ Training Date</b>	
License Agreement: Page 6	
<input type="checkbox"/> <b>Date: Day, Month, Year</b>	<input type="checkbox"/> <b>Invoice/Billing (if different from administrator): Business Name, Contact Person, Address, City, State, Zip</b>
<input type="checkbox"/> <b>For Licensee: Administrator Signature, Date, Printed Name, Title, School Name, City &amp; State</b>	<input type="checkbox"/> <b>Optional Data Sharing Agreement License Agreement: Administrator Signature, Date, Printed Name</b>

***When all required items are complete on School Information Form and Page 6 of License Agreement, documents are ready for submission.***

***Make two copies of the completed School Information Form and License Agreement***

- Send originals to the University of Oregon SWIS Manager**
- Keep one copy for your reference**
- Send a copy of the School Information Form and License Agreement to the school**

*Congratulations in getting your school set up and thank you in advance for sending in completed, accurate and legible information! We will contact you via email when your account is set up.*