
TEXAS ASSOCIATION OF SCHOOL BOARDS

PURCHASE ORDER INVOICE



Date:

First Name (of the enrolling student):

Last name (of the enrolling student):

Enrollee e-mail address:

Name of course in which you are requesting enrollment:

Name of person completing this form (if different from the student):

School district name:

District purchase order number:

Total cost of courses/purchase order authorization amount:

Billing address:

Phone number of billing contact:

Has enrollee created a user profile in the OLC (required):

Please indicate the total amount of the purchase order:

Complete and fax this form to: 512-467-3599