



## Illinois ACT Online Prep School Version Order Form

The Illinois State Board of Education has entered into an agreement with ACT to provide ACT Online Prep to public high schools in Illinois through May 31, 2013 at no cost to the school or district.

Please provide information below for each site for which ACT Online Prep will be licensed. For multiple site orders, ACT can also email you a pdf version of this form to complete electronically and return by email or FAX. Once ACT has received the order form and it is processed, the designated contact person listed on the order form will receive an email on how to set up ACT Online Prep. Please contact ACT Customer Services at (800) 498 – 6065 with questions.

*\* Please do not complete this form if a school currently has an ACT Online Prep license. Your site licenses will be renewed automatically by ACT and will be valid through May 31, 2013. ACT will not issue an invoice for this renewal.*

NUMBER OF SITE LICENSSES BEING REQUESTED: \_\_\_\_\_

### **DISTRICT INFORMATION:**

|                 |                |               |  |
|-----------------|----------------|---------------|--|
| _____           |                | _____         |  |
| District Name   |                | Contact Name  |  |
| _____           |                | _____         |  |
| Address         |                | Phone Number  |  |
| _____           |                | _____         |  |
|                 |                | Email Address |  |
| _____           |                | _____         |  |
| City            | State/Province |               |  |
| _____           |                | _____         |  |
| Zip/Postal Code | Country        |               |  |

---

### **SITE # 1 OF \_\_\_\_ SITE LICENSES**

|                 |                |               |            |
|-----------------|----------------|---------------|------------|
| _____           |                | _____         | _____      |
| School Name     |                | ACT HS Code   | Enrollment |
| _____           |                | _____         |            |
| Address         |                | Contact Name  |            |
| _____           |                | _____         |            |
|                 |                | Phone Number  |            |
| _____           |                | _____         |            |
| City            | State/Province | Email Address |            |
| _____           |                | _____         |            |
| Zip/Postal Code | Country        |               |            |

**ACT Customer Services**  
P.O. Box 1008  
Iowa City, IA 52243  
Phone: (800) 498 – 6065, (319) 337 – 1429  
Fax: (800) 498 – 6479



*You may copy this page to provide information about additional sites*

**SITE #** \_\_\_\_\_

|                 |                |               |            |
|-----------------|----------------|---------------|------------|
| School Name     |                | ACT HS Code   | Enrollment |
| Address         |                | Contact Name  |            |
|                 |                | Phone Number  |            |
| City            | State/Province | Email Address |            |
| Zip/Postal Code | Country        |               |            |

---

**SITE #** \_\_\_\_\_

|                 |                |               |            |
|-----------------|----------------|---------------|------------|
| School Name     |                | ACT HS Code   | Enrollment |
| Address         |                | Contact Name  |            |
|                 |                | Phone Number  |            |
| City            | State/Province | Email Address |            |
| Zip/Postal Code | Country        |               |            |

---

**SITE #** \_\_\_\_\_

|                 |                |               |            |
|-----------------|----------------|---------------|------------|
| School Name     |                | ACT HS Code   | Enrollment |
| Address         |                | Contact Name  |            |
|                 |                | Phone Number  |            |
| City            | State/Province | Email Address |            |
| Zip/Postal Code | Country        |               |            |

**ACT Customer Services**  
**P.O. Box 1008**  
**Iowa City, IA 52243**  
**Phone: (800) 498 – 6065, (319) 337 – 1429**  
**Fax: (800) 498 – 6479**