

# Apple Application Volume Purchasing Facilitator Form

Please email this form to Jerry Shepardson  
[j.shepardson@cms.k12.nc.us](mailto:j.shepardson@cms.k12.nc.us)

This form must be emailed from the Principals' CMS email account as this will serve as the principals' signature and confirmation of the designated facilitator.

Please Type School Name:

Please Type School Courier Code:

- *Must be a CMS employee designated by the principal.*
- *Each school/department may only have one Facilitator*
- *Should the designated Facilitator leave your school/department, please contact the Instructional Technology Department at 980-343-6604 or email [j.shepardson@cms.k12.nc.us](mailto:j.shepardson@cms.k12.nc.us).*
- *Sharing of confidential login and password is strictly prohibited. Any unauthorized use of any login or password should be reported immediately. If Apple Volume Purchasing Facilitator information is breached, please contact the Instructional Technology Department at 980-343-6604 or email [j.shepardson@cms.k12.nc.us](mailto:j.shepardson@cms.k12.nc.us)*

<b>Please designate one facilitator only</b>
<b>Apple Volume Purchasing Facilitator:</b>
<ul style="list-style-type: none"><li>▪ Acts as the point of contact for communications between the CMS Apple Program Manager to coordinate volume purchases of applications for the iPod and iPad.</li><li>▪ Agrees to participate in an Apple Volume Purchasing Program Webinar</li><li>▪ Redeems Volume Vouchers to purchase approved applications through the Apple iTunes for Education store</li><li>▪ Installs applications purchased to iPods/iPads</li><li>▪ Agrees to abide by Federal Copyright laws and licensing for all purchased applications</li></ul>
<b>Apple Volume Purchasing Facilitator Name:</b>
<b>Apple Volume Purchasing Facilitator E-mail Address:</b>

Please Type Principals' Name:

Please Type Today's Date: