



ALAS Job Posting Request Form

JOB POSTING DATE

Job Posting Start Date: _____

Job Application End Date: _____

CONTACT/BILLING INFORMATION

Company Name: _____

Contact Name: _____

Title: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

JOB DESCRIPTION

Please attach full job posting to this request form

JOB POSTING SELECTION

Option 1: includes six (6) week posting on ALAS website:

Option 2: includes posting on ALAS bi-weekly update three (3) times; email to SLA cohort and alumni; and push on Facebook and Twitter:

ALAS Dues Paying Member – Free*

ALAS Dues Paying Member – \$150

ALAS School District Member – Free

ALAS School District Member – \$150

ALAS Institutional Member – Free

ALAS Institutional Member – \$150

ALAS Corporate Member – Free

ALAS Corporate Member – Free

ALAS Non-Member - \$150

ALAS Non-Member - \$150

*** Note: Dues Paying Members may only post for the school district where they are employed up to 10 per membership year.**

Total \$ _____

METHOD OF PAYMENT

Check Enclosed: \$_____ (payable to ALAS)

Bill Me – Purchase Order Enclosed Bill Me – Invoice me at address provided above

Credit Card (MC, Visa, Discover)

Name on Card _____

Credit Card # _____ Exp. (Month/Year) _____

Billing Address _____

City _____ State _____ Zip _____

Please submit completed request form and payment to:

ALAS

PO Box 65204

Washington, DC 20035

operations@alasedu.org