OSP Product Setup Form

Required Information					
Product Name (31 Character Limit)					
Product Description (245 Character Limit)					
Sponsor/Teacher (First Name, Last Name, and Email Address)					
First Name:			Last Name:		
!					
Email: Sale Dates (Date Format mm/dd/yyyy)					
	te Format mm/dd/yyyy)		Offling Date		
Online Date Price (Fixed or V	Variable)		Offline Date	Grade Level (K-12th, All, NA)	
☐ Fixed (ex. \$1				Grade Level (K-12th, All, IVA)	
☐ Variable (ex. \$1		\$			
Fund Account (Leave blank if Unknown)					
r and recount	(Low to ordine it officiowity)				
Number			Description		
1.0111001			2 334117 11011	1	
Additional Options and Notes					
Check Boxes if Applicable - Starred Features May Not be Available at Your School					
☐ Limited Quantity (Inventory)			OSMS Software □ OSP □ OTR □ OMS		
How Many?			☐ No StudentID Required		
☐ Maximum Allowed per Student		_	☐ Taxable		
How Many?		_	☐ Ticketed Item (Barcoded Item) *		
☐ Product Image (If Yes, Submit File to Bookkeeper)		☐ Verify Grade Level (If Required) *			
Product Description Cont. (Additional Text Exceeding Character Limit Above)					
Other Notes					
Other Notes					
A managed Ciam	Approval Signature			Date	