PAIS PLACEMENT AGENCY INFORMATION SYSTEM USER ID / PASSWORD SUBMISSION FORM

(Please fill out all fields)

| USER ID | |
|---|--|
| (User ID and Password must be 4 letters and 4 numbers (example: abdc1234) | |
| PASSWORD | |
| AGENCY ID | |
| PC CODE: A | |
| USER'S FIRST NAME | |
| USER'S LAST NAME | |
| AGENCY TELEPHONE NUMBER | |
| AGENCY FAX NUMBER | |
| AGENCY ADDRESS | |
| CITY, STATE, ZIP | |

Please email to Helpdesk account.