



BAKERSFIELD CITY SCHOOL DISTRICT

Department of Stores and Purchasing

AUTHORIZATION FOR ONLINE

Please complete the following form and submit an electronic copy to halls@bcisd.com and cc: purchasingbuyers@bcisd.com.

Request Type:

☐ New User Creation ☐ Name Change (only) ☐ Site Change (Previous Site: _____)

I am requesting authorization to order from the following online vendor(s):

☐ Amazon ☐ Lakeshore ☐ Office Depot ☐ School Specialty ☐ Southwest School Supply ☐ Stinson's

Please only submit requests for the online vendors listed above – DO NOT select a vendor you have an existing account with.

****ANNUAL REQUESTS ARE NOT NECESSARY****

Employee's First and Last Name: _____

E-Mail Address: _____ Job Title: _____

Site: _____ Site Address: _____

Site Phone Number: _____ Extension: _____ (optional)

Preferred Password: _____
(8-10 characters – must contain at least one uppercase letter and number)

Special Notes:

- Amazon and Office Depot: Your district e-mail address will be used as your username
- School Specialty (ONLY): 'Welcome123' is the default password for all new accounts. Please change your password after the initial login.
- Southwest Schools (ONLY): 'southwest' is the default password for all new accounts. Please change your password after the initial login. Your username will be your first and last name (all lowercase and combined; e.g., joesmith)
- Stinson's (ONLY): Your username will be your **district email**.

Please include authorized budgets for online ordering

Account Code 1: _____ Account Code 2: _____

Account Code 3: _____ Account Code 4: _____

Account Code 5: _____ Account Code 6: _____

Requestor Signature: _____ Date: _____

Department Head/Principal Signature: _____ Date: _____

Revised 7/2026