		Student Infor	mation		
Application Date:					
Students Last Nar	me	First Name	Middle		
Date of Birth	Age Gr	ade	696 Enrollmen		
PARENT/GUAR	DIAN INFORMA	ATION			
Last Name		First Name	Middle		
Address		City	State	Zip	
Parent/Legal Gua	rdian Social Secu	<mark>rity Number</mark> I	Phone Number		
Parent/Legal Guardian Signature I REQUEST THE SCHOOL TO VERIFY ENROLLM			Date NT AND OR/ATTENDANCE FOR THE		
ABOVE NAMED	STUDENT.				
	9	School Admission	on Office		
I Certify that the And will be:	above student is	currently enrolled	at		
Attending School on Campus			(School Stamp/Seal)		
Distance L	earning Online				
School Address: _			Telephone No		
Signature of Scho	ol Official:		 Title		

2020 SCHOOL COVID-19 READINESS ASSISTANCE PROGRAM (SCRAP) INTENDED USE OF ASSISTANCE FUNDS

	Education Supplies for the children – pencil, pens, paper, crayons, tex notebooks, binders, ink cartridges, desk, chair, etc. (A) Electronic Items – Laptop, Chromebook, Ipad, Tablet, printer, scanner Cleaning Supplies for home. Personal protective equipment (PPE) masks, gloves and Hand sanitize Food for Student Utilities (Additional costs because your Student(s) are distance learnin Personal Hygiene Products (A) Other	for your Student
I the al	hereby certify that I am the Custodial Parent e above stated child and the information is true and correct and if requeste	
<mark>Indiar</mark>	dian Tribe can provide additional documentation in support of this information the covid-19 Panel these assistance funds will be used as intended due to the Covid-19 Panel	on. I also certify
	Signature Dat	e
(A)	A) Please check these items only if you did not check them for the Assistance Program	e Emergency
•	 Note - You do not need to provide any documentation for purchases of you have received your check, however it is recommended that you say for future reference. 	• •