

Student Information

Application Date: _____

Students Last Name	First Name	Middle	
Date of Birth	Age	Grade	696-____-____ Enrollment Number

PARENT/GUARDIAN INFORMATION

Last Name	First Name	Middle	
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Address	City	State	Zip
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Parent/Legal Guardian Social Security Number

Parent/Legal Guardian Signature	Date
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I REQUEST THE SCHOOL TO VERIFY ENROLLMENT AND OR/ATTENDANCE FOR THE ABOVE NAMED STUDENT.

School Admission Office

I Certify that the above student is currently enrolled at _____
And will be:

___ Attending School on Campus (School Stamp/Seal)

___ Distance Learning Online

School Address: _____ Telephone No. _____

Signature of School Official:	Title
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2020 SCHOOL COVID-19 READINESS ASSISTANCE PROGRAM (SCRAP)
INTENDED USE OF ASSISTANCE FUNDS

- Education Supplies for the children – pencil, pens, paper, crayons, text books, 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 sanitizer for your Student
- Food for Student
- Utilities (Additional costs because your Student(s) are distance learning)
- Personal Hygiene Products **(A)**
- Approved School Uniforms (Only) are allowed through the 2020 School COVID-19 Readiness Assistance Program
- Other

I _____ hereby certify that I am the Custodial Parent/Legal Guardian of the above stated child and the information is true and correct and if requested by the Quechan Indian Tribe can provide additional documentation in support of this information. I also certify that these assistance funds will be used as intended due to the Covid-19 Pandemic.

Signature

Date

(A) Please check these items only if you did not check them for the Emergency Assistance Program

- Note - You do not need to provide any documentation for purchases or payments after you have received your check, however it is recommended that you save your receipts for future reference.