

Delaware Nation

Laptop Application

Attn: Grant Manager

P.O. Box 825

Anadarko, OK 73005

Ph: (405)247-2448

Email:

Broadband Laptop Application

- **PURPOSE:** Delaware Nation's Broadband Grant provides each Delaware Nation household one of each device listed below for the purpose of enabling citizens ages **18-59 years old** to utilize them for educational and/or employment purposes:
 - Lenovo ThinkBook 15 G3 AMD Ryzen 5 5500U, 8GB, 256GB SSD 15.6"
 - Cyber Acoustics USB Stereo Headset
 - Microsoft Office Home and Business 2021
- **APPLICATION PROCESS:** Only one application per household will be accepted. If there are two households living at the same address, please sign and return the attached affidavit.

Once an application is complete and processed, the tribal citizen will receive an email confirming that their laptop has been approved and an estimated shipping/delivery date. If you wish to receive this notification, **please be sure to include a valid email address.**

- **APPLICATION START DATE AND DEADLINES:** August 24, 2022 – February 28, 2023 unless supplies are exhausted prior to the end date. Application must be submitted by 5:00 p.m. central standard time **on or before February 28, 2023**. All applicants must be 18 years to 59 years old when submitting the application.
- **APPLICATION SUBMISSION:** Applications can be obtained on the Delaware Nation website or by calling 405-247-2448. Applications can be submitted by email or mail. All email submissions should be submitted to broadband@delawarenation-nsn.gov . **Please submit to this email only.** Applications submitted to other Delaware Nation emails run the risk of not being processed. If you wish to mail your application, please mail to:

Delaware Nation

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PO Box 825

Anadarko, OK 73005

ELIGIBILITY REQUIREMENTS:

1. Citizenship Applicant applying for household must be an enrolled Delaware Nation citizen
2. Applicant Age: 18 years – 59 years
3. Applicant Residency: Nation-wide

✓ REQUIRED DOCUMENTS:

- ✓ Completed application
- ✓ Copy of the applicant's Delaware Nation enrollment card
- ✓ Signed affidavit for those with multiple households at one address

APPLICATION: Please print all information requested below.

Citizen Roll #: _____ Birthdate: ___ Month ___ Day, _____ Year

First Name: _____ Last Name: _____ Age : _____

Physical Address: _____

City, State & Zip: _____

Mailing Address (if different): _____

City, State & Zip: _____

Contact Phone Number: _____

Email Address: _____

Laptop Delivery Preferences (Please mark one):

- I prefer to pick-up my laptop in person at the Delaware Nation Tribal Complex in Anadarko.
- I prefer for the laptop to be shipped to my **mailing address** indicated on this application.

Laptop Setup Preferences (Please mark one):

- I have a Microsoft Account and prefer to set up the laptop and software myself.
- I prefer for the laptop and software be setup by Delaware Nation.

***** Please know that if Delaware Nation IT sets up your Microsoft Account, the account will be tied to Delaware Nation's Microsoft account. In the event of a PC rebuild the laptop will have to come back to us for the download of that office software.***

CERTIFICATION:

- 1. I am the head of a household***
- 2. I will be using these devices for (please check all that apply):***
 - Educational Courses
 - Employment
- 3. I will complete a quarterly online survey on the Delaware Nation website (www.delawarenation-nsn.gov) regarding the usage of these devices***
- 4. I will keep the devices for at least two years, or return them to Delaware Nation if the devices are no longer needed or wanted.***

Signature of applicant/Date:

X

For Office Use Only

Date and Time Application was received: _____

Roll #: _____

A completed application and copy of Delaware Nation enrollment card were received:

____ **Yes** ____ **No**

If No, document communication with applicant:

Date Equipment was shipped: _____ **Carrier:** _____

Tracking #: _____

Laptop Serial #: _____

Microsoft License #: _____

AFFIDAVIT OF SEPARATE HOUSEHOLD

Citizen Roll #: _____

Printed Legal First and Last Name: _____

Physical Address: _____

City, State & Zip: _____

Mailing Address (if different): _____

City, State & Zip: _____

Contact Phone Number: _____

Email Address: _____

I, _____, hereby affirm that I am a separate financial household from any and all other adult Delaware Nation enrolled tribal citizens that reside at the same physical address and/or mailing address listed on this application. I also affirm that I am not claimed as a dependent in another household for any other programs or applications.

Legal Name Signature: _____

Date: _____

NOTARY:

State of _____ County of _____

The foregoing instrument was acknowledged before me

This _____ day of _____, 20 _____

By _____

My Commission Expires _____