

Sitka Tribe of Alaska

TRIBAL GOVERNMENT FOR SITKA, ALASKA



2020 CARES Act STA Higher Education Scholarship Recipient Computer Assistance Program

This form will be used for Sitka Tribe of Alaska (STA) internal use only.

The information contained on this form is not for distribution to any outside agency or entity.

The 2020 CARES Act STA Higher Education Scholarship Recipient Computer Assistance Program is part of STA's response to the COVID-19 pandemic, and our effort to ensure that all STA Tribal Citizens pursuing their higher education degrees have access to the computing devices they need to be successful.

In response to the COVID-19 pandemic and its impact on higher education, Sitka Tribe of Alaska will be providing a new laptop and Microsoft Office software to all STA Higher Education Scholarship recipients prior to the 2020 - 2021 academic year. With many colleges and universities moving to online instruction in the fall and/or preparing to respond to surges in COVID-19 by moving to online learning, STA wants to ensure that you have the tools you need to be successful in your academic pursuits.

If you have any questions, please email at ITcares@sitkatriben-sn.gov or call 907-747-3207 to speak with a CREED staff member. Please put "HE Scholarship Recipient CARES Application" in the email subject line. Please submit as soon as possible and no later than July 31, 2020.

* Upon receipt, this device becomes your property. STA will provide NO technical support, warranty or replacement for any of these devices. Upon receipt you may choose to purchase/register warranties or purchase a separate replacement plan, but STA will not repair or replace the device or accompanying items. STA will not purchase any software or provide any funding for subscriptions or software licenses beyond Microsoft Office.

Applicant Information

Please complete the following information:

First Name: _____ **MI:** _____ **Last Name:** _____

STA Higher Education Scholarship recipients will have their choice of the device they feel will best support their academic needs. Please indicate which of the following devices you want by checking the box (please indicate only one computing device option):

- 13" MacBook Pro ***
- Dell XSP 13" Laptop ***
- Dell XSP 13" Laptop w/ 2-in-1 Touch Screen ***
- 12.9" iPad Pro 256GB w/ Apple Pencil and Magic Keyboard**

** Microsoft Office Software values at \$99.99 will be provided for laptops.*

Please indicate the method of delivery for your computing device:

- Will pick it up at the STA office in Sitka**
- Will need it shipped to me at the following address:**

Address: _____

City: _____ **State:** _____ **Zip Code:** _____

Certification of Emergency Assistance during COVID-19

I, _____ that I am a citizen of Sitka Tribe of Alaska. I hereby request a one-time COVID-19 distribution of a personal computing device. This personal computing device will be used by me for the expressed purpose of supporting my pursuit of higher education. With my signature below, I declare that all the above statements are true and accurate.

Signature

Date

Application can be submitted to ITcares@sitkatriben-sn.gov or address/fax number below

Must be submitted No later than July 31, 2020