Pyramid Lake Paiute Tribe

P. O. Box 256 Nixon, Nevada 89424 Telephone: (775) 574-1000 Fax: (775) 574-1008

Pyramid Lake Paiute Tribe 2020 Distance Learning Support Program Request for Support

The Pyramid Lake Paiute Tribe is pleased to announce the 2020 Distance Learning Support Program. Our main goal of this program is to provide assistance to our PLPT school Children aged 6-17. We would like to help by providing Apple IPads to maximize the success of distance learning.

Due to the low volume of IPads that we were able to order, at this time we are only able to provide equipment to Children from schools that;

1. Have not already given out equipment such as, laptops, Chromebooks, or iPads.

2. Has no plans to distribute equipment such as, laptops, Chromebooks, or iPads.

3. Are still waiting for equipment to be delivered. (this decision was made because of the backordering of equipment nationwide, with no update on when schools will receive their products.)

4. Children must be enrolled with the Pyramid Lake Paiute Tribe.

If your child's school meets any one of these criteria, please fill out the form below and email to <u>distance@plpt.nsn.us</u> or by mailing to the address above.

<u>School's will be called to ask about their distance learning plans and equipment stock. The</u> <u>Pyramid Lake Paiute Tribe will in **no way** ask about individual students due to privacy laws.</u>

Name (Print): _____

Mailing Address (Street, City, State, Zip): _____

Phone Number(s): _____

Name(s) of Child(ren) 6 through 17 years old and Pyramid Lake Paiute Tribal Enrollment Number or Birthdate:

1. Name:	Enrollment #:
School:	School Phone #:
2. Name:	Enrollment #:
School:	School Phone #:
3. Name:	Enrollment #:
School:	School Phone #:
4. Name:	Enrollment #:
School:	School Phone #:

CERTIFICATION

I hereby certify that my child(ren) meet the criteria for receiving IPads, accessories, and software from the Pyramid Lake Paiute Tribe.

- I acknowledge that all items received are my responsibility and that no replacements will be issued.
- I acknowledge that any software provided at the time of transfer are on a limited basis and that if I wish to continue using paid software after the expiration date, it is my responsibility.
- I certify that the information submitted on this application is true and correct to the best of my knowledge.
- I authorize the Tribe to share this information with the Tribe's Enrollment Department to verify my tribal enrollment status and/or the tribal enrollment status of the minor(s) in my custody and care.

PRINT NAME

SIGNATURE

DATE