

**RETURN APPLICATION TO:**

Computers4Kids  
945 Second Street SE  
Charlottesville, VA 22902  
434-817-1121 voice 434-817-1122 fax  
info@computers4kids.net

# Program Agreement

**Complete and return this agreement and the attached application.**

Before being accepted into the Computers4Kids Program, all families must agree to the following:

**1. The student will attend a three-afternoon training class at Computers4Kids.**

This basic instruction class gives students the skills needed to enhance their technology skills. Attendance and promptness at **all** classes is mandatory. An orientation for parents is held on the first day of training, after student training is finished.

**2. The student will meet with a mentor once a week for at least 36 hours (about 9 months).**

After completing the training class, students are matched with a mentor who will work with them to learn more complex computer skills and complete projects. All mentoring will take place at Computers4Kids, located at 945 Second Street SE.

**3. School Release Agreement**

The student and his/her parents or guardians agree that Computers4Kids may have access to the school records of the student for the purpose of studying the effects of computer ownership on academic performance and to gather contact information.

**4. Income verification**

Computers4Kids participants must be eligible for Federal Free or Reduced Lunch Programs. The student and his/her parents or guardians agree that Computers4Kids may have access to income information, including, but not limited to, school nutrition program applications, Federal tax returns, or Public Housing vouchers.

**5. Email Address**

All Computers4Kids students of age 13 and above will create email accounts.

**6. Student Work**

Computers4Kids reserves the right to publicly display any and all student work created or stored at Computers4Kids.

**7. Photo/Video**

I give permission for Computers4Kids to use my child's (or my) picture/videotape for whatever purpose Computers4Kids deems appropriate without compensation to my child or me.

**This is not a requirement for participation in the Computers4Kids program.**

\_\_\_ yes, I give permission for a photo/video release

\_\_\_ no, I do NOT give permission for a photo/video release

We have read and understand the requirements of the program and agree to fulfill our commitment.

\_\_\_\_\_  
Parent/Guardian Signature  
Parent/Guardian's name (please print) \_\_\_\_\_  
Date \_\_\_\_\_

\_\_\_\_\_  
Student Signature  
Student's name (please print) \_\_\_\_\_  
Date \_\_\_\_\_



## Student Application

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Upon review of your COMPLETE application, a Computers4Kids staff member will contact you to confirm your training session. Availability will be determined on a first-come, first-served basis.

Go to [www.computers4kids.net](http://www.computers4kids.net) for our next training sessions or call us at 434.817.1121 ext 2

**Student Information**

First name: \_\_\_\_\_ Middle name: \_\_\_\_\_  
 Last name: \_\_\_\_\_ Nickname: \_\_\_\_\_  
 Home phone: (    )    - \_\_\_\_\_ If you do not have a phone,  
 how should we contact you? \_\_\_\_\_  
 Street address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Date of birth:    /    / \_\_\_\_\_ Current age: \_\_\_\_\_ Sex:  M  F  Other  
 E-mail address: \_\_\_\_\_ Student's mobile  
 phone: (    )    - \_\_\_\_\_

T-Shirt Size (circle one): S   M   L   XL   XXL   XXXL

**Parent or Guardian Information**

Full name: \_\_\_\_\_ Relation to student: \_\_\_\_\_  
 Work phone: (    )    - \_\_\_\_\_ Parent's mobile phone: (    )    - \_\_\_\_\_  
 E-mail address: \_\_\_\_\_

**Emergency Information (DIFFERENT than parent/guardian information)**

In case of an emergency and parent/guardian cannot be reached , please contact this person:  
 Relationship to student: \_\_\_\_\_ Phone number: (    )    - \_\_\_\_\_

**School Information (for current or upcoming school year if summer)**

School: \_\_\_\_\_ Grade: \_\_\_\_\_

## **For statistical purposes only:**

(The following information will be used to help C4K better serve its students, their families, and the community.)

### **Student Ethnicity:**

- |                                              |                                                    |                                                         |
|----------------------------------------------|----------------------------------------------------|---------------------------------------------------------|
| <input type="checkbox"/> White, non-Hispanic | <input type="checkbox"/> Hispanic                  | <input type="checkbox"/> American Indian/Alaskan native |
| <input type="checkbox"/> Black, non-Hispanic | <input type="checkbox"/> Asian or Pacific Islander | <input type="checkbox"/> Other                          |

### **Does your family:**

- |                               |                                                                               |                                                                      |
|-------------------------------|-------------------------------------------------------------------------------|----------------------------------------------------------------------|
| <input type="checkbox"/> Rent | <input type="checkbox"/> Live with family or friends for reduced or free rent | <input type="checkbox"/> Consider itself to be homeless at this time |
| <input type="checkbox"/> Own  |                                                                               |                                                                      |

If you were **not** born in the United States, in which country were you born? \_\_\_\_\_

### **What is your family's annual household income?**

(INCLUDE all sources of income, such as welfare payments, child support, alimony, Social Security, dividends or interest, rental income, unemployment, retirement income, pensions, veteran payments, regular contributions from persons not living in the household, royalties, or other cash income.)

- |                                               |                                               |                                               |
|-----------------------------------------------|-----------------------------------------------|-----------------------------------------------|
| <input type="checkbox"/> Below \$11,000       | <input type="checkbox"/> \$27,501 to \$31,500 | <input type="checkbox"/> \$47,501 to \$51,500 |
| <input type="checkbox"/> \$11,001 to \$15,500 | <input type="checkbox"/> \$31,501 to \$35,500 | <input type="checkbox"/> \$51,501 to \$55,500 |
| <input type="checkbox"/> \$15,501 to \$19,500 | <input type="checkbox"/> \$35,501 to \$39,500 | <input type="checkbox"/> above \$55,501       |
| <input type="checkbox"/> \$19,501 to \$23,500 | <input type="checkbox"/> \$39,501 to \$43,500 |                                               |
| <input type="checkbox"/> \$23,501 to \$27,500 | <input type="checkbox"/> \$43,501 to \$47,500 |                                               |

### **Mother's highest grade completed (circle one):**

Below 8 | 8 | 9 | 10 | 11 | 12 **but did not graduate** | GED | HS Graduate | Some college | Associate's | Bachelor's | Master's | Doctorate

### **Father's highest grade completed (circle one):**

Below 8 | 8 | 9 | 10 | 11 | 12 **but did not graduate** | GED | HS Graduate | Some college | Associate's | Bachelor's | Master's | Doctorate

**Including the student, how many people live in your household?** \_\_\_\_\_

### **Who lives in the household?**

Please list all occupants, their relationship TO THE STUDENT and their age, such as, "Brother – 15."  
Do not include the student here.

- |          |          |          |
|----------|----------|----------|
| 1. _____ | 4. _____ | 7. _____ |
| 2. _____ | 5. _____ | 8. _____ |
| 3. _____ | 6. _____ | 9. _____ |

### **Living Situation (check ALL that apply)?**

- |                                                              |                                                          |                                                       |
|--------------------------------------------------------------|----------------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> with single parent/guardian, female | <input type="checkbox"/> with unmarried parents/partners | <input type="checkbox"/> in shelter                   |
| <input type="checkbox"/> with single parent/guardian, male   | <input type="checkbox"/> in foster care                  | <input type="checkbox"/> in detention center          |
| <input type="checkbox"/> with married parents/step-parents   | <input type="checkbox"/> in treatment center             | <input type="checkbox"/> other (please specify) _____ |

### **How did you hear about C4K?**

- |                                                       |                                                   |                                                     |
|-------------------------------------------------------|---------------------------------------------------|-----------------------------------------------------|
| <input type="checkbox"/> friend _____                 | <input type="checkbox"/> relative _____           | <input type="checkbox"/> classmate _____            |
| <input type="checkbox"/> teacher _____                | <input type="checkbox"/> guidance counselor _____ | <input type="checkbox"/> non-school counselor _____ |
| <input type="checkbox"/> other (please specify) _____ |                                                   |                                                     |