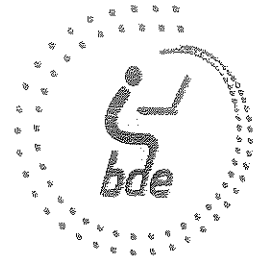


Return Completed Application to:
175 W. Main St. Benton Harbor, MI



Bridges to Digital Excellence
Computers in the Home Program
Is offering

FREE COMPUTERS FOR KIDS AND FAMILIES!!

The BDE mission is to reach youth and families that do not have access to a computer at their home. If your K-12 child attends a school in the Berrien County School District, you ARE eligible for a FREE computer -Regardless of Income, ethnicity or anything else! Also, if you provide Home-School curriculum for your child, you too are eligible!

All persons wishing to register for the Computers in the Home program must present the following items:

A report card from the child or a letter addressed
to your child from their school

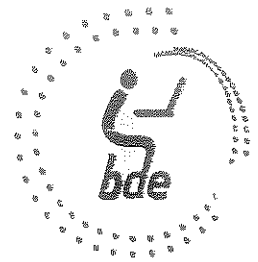
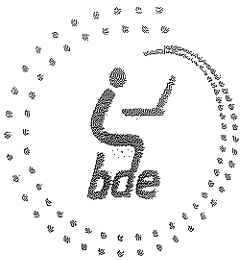
AND

A valid photo ID/ A utility bill with current address

The address of the child listed in the application must match the report card and the photo ID/utility bill. Only parents or guardians of the child can take the class *with* the child.

Please return completed application in person to sign up for class times.

Bridges to Digital Excellence (BDE)
Computers in the Home Program
175 W. Main St. Benton Harbor, MI
269-757-0218 Fax No.: 269-277-5007
Office Hours: M-Th. 9am-5pm Fri. 9am-4pm



The goal of the Bridges to Digital Excellence (BDE) Project is to provide families with computer equipment, training, and support in a manner that encourages:

- Youth to participate in the information age
- Improved academic performance for youth
- Families to work together toward a common goal
- Enhanced employment opportunities for adults
- Community collaboration and cooperation

READ GUIDELINES VERY CAREFULLY

Program Guidelines:

1. Your child **must** be in or entering K through 12th grade in Berrien County Schools. If you provide Home-School classes for your child, you must show proof of registration with the Berrien County Intermediate School District.
2. **Both** the parent/guardian and child must attend 8 hours of class time. Any family missing more than 15 minutes total of class time must drop the class and re-register.
3. You **must NOT** currently have a computer in the home.
4. Your application must have all pages completed with both parent and student signatures.
5. **Please have a photo ID or utility bill (water, electric, etc.) and the child's most recent report card with you at the time of registration. The addresses on the ID/utility bill and report card must match. You will not be allowed to register until you can produce the necessary documentation.**
6. **Only the parent/guardian and the student registered for class may attend.** However, if you have more than one child in K through 12th grade, we will make arrangements for all students to attend. Please inform the person who registered you to make a note on your application.
7. If you might have a conflict with an employer or other event please make arrangements prior to starting class. We offer **no** makeup time and you must be on time for class.
8. **Only one computer is available per family or residence.**
9. If class is canceled due to weather or other conditions you will be notified by phone at least 1 hour before class. Class make-up will be scheduled.
10. Upon completion of class, the computer is to be placed in the child's primary residence so that the child has **access to the computer.**
11. Unless otherwise stated, all training times are: Evening 5:30 PM to 7:30 PM Tuesday and Thursday (Four Sessions)
Afternoon 12 PM to 4PM Saturday (Two Sessions)

Families completing the training will receive the Following:

A Refurbished Computer with Windows XP and Microsoft Office 2003 pre-installed along with a Keyboard , Mouse and a Monitor
An Anti-Virus/Anti-Spyware Program
Six Months of Free Dial-Up Internet Access from ACD.Net (At the end of six months, you can continue access for \$10 a month)
Three Months of Free Repair and Support from our Tech Area (At the end of three months, you still receive repair/support at reduced cost for as long as you own the computer that you receive from us.)

Please indicate whether you have a computer at home. Yes _____ No _____
What grade is you child currently in or entering into? _____

I state that the information in this application is correct and agree to the program guidelines listed above.

PARENT/GUARDIAN SIGNATURE

PRINT NAME

DATE

1. Name of Parent/Guardian applicant: _____
2. Name of student applicant: _____
3. Address: _____
City, State, Zip: _____
4. Home Phone: _____ Other Phone: _____
5. How did you hear about this program? _____
- 6a. Have you used computers in the past? Adult: _____ Youth: _____

6b. If so, how have you used computers in the past?

Parent/Guardian: _____

Student: _____

7. Adult Highest Educational Level Achieved:

- High School Graduate
- GED
- Enrollment in GED Program
- Some Post-Secondary Education
- Associate Degree or Higher

8. Grade Level of participating youth (2, 4, etc.) _____

9. Name of school _____

10. What city and/or township do you live in?

City _____ Township _____

11. Please list additional sibling in the home who may also use the computer

	Name	Grade Level	School
Child #1	_____	_____	_____
Child #2	_____	_____	_____
Child #3	_____	_____	_____
Child #4	_____	_____	_____

12. Are there other people in your household who might also use the computer (e.g. grandparents, cousins? others)? _____

13. If you are an adult, are you employed? yes _____ no _____

14. If yes, please state your position, employer and income:

Adult 1: _____ Position _____ Income _____
 Employer _____ _____ _____

15. If you are employed, does your job require the use of computers? _____

If yes, what are your computer responsibilities and how many hours per week do you spend on each one?

16. After you have completed eight hours of instruction, you will be given the opportunity to receive a free refurbished computer with Microsoft Windows XP and Microsoft Office 2003 software, keyboard, mouse, power cords, modem, and three months of free internet access. In order to get online, the modem must be connected to your phone line. The phone will work in the same manner, except you will be able to use the computer as an additional type of telephone. Are you willing and able to use your telephone line for this purpose?

Yes ____ No ____

17. Participation in **ALL** computer training classes will be required. You may select afternoon, evening or weekend sessions. If you agree to participate will you be able to attend these classes?

Afternoon Evening (Please Circle One)

18. What is your family income? (optional)

____ \$5,000 - \$10,000 ____ \$20,001 - \$25,000 ____ \$35,001 - \$40,000 ____ \$60,000 +
____ \$10,001 - \$15,000 ____ \$25,001 - \$30,000 ____ \$40,000 - \$50,000
____ \$15,001 - \$20,000 ____ \$30,001 - \$35,000 ____ \$50,001 - \$60,000

19. Do you: Own a Home, Rent a Home, Rent an Apartment, Other _____ (Please Circle One)

20. If you currently do not own a home would you like to be contacted by a CWCC staff member to find out if you qualify for assistance in purchasing a home? (No information is given out to outside individuals or marketing firms)

Yes ____ No ____

21. Would you be interested in future educational and skill building opportunities designed to enhance employability?

Yes ____ No ____

22. How many dependents do you have?

23. Goal Statement. Please check any of the following statements that indicate why you are interested in becoming a participant. If you would like please write one or two paragraphs on other goals. Please use following page.

- ____ I will use the computer to complete my school work.
____ My grades will improve through the use of the computer.
____ My vocational skills will improve.

I have read the requirements and agree to abide by the program guidelines if I am selected.
(Both student and parent/guardian applicants must sign).

Signature (Student)

Date

Signature (Parent/Guardian)

Date

Bridges to Digital Excellence (BDE) Program Consent Form

In order to improve our Bridges to Digital Excellence (BDE) Program, we will contract the services of an independent consulting firm to review and evaluate our program. They will be using the information gathered in the applicant surveys.

I acknowledge that my part in this evaluation is confidential. None of the information will identify me by name. All information will be given a code number and access to the data will be limited to the management of the Bridges to Digital Excellence project staff and relevant Public School staff, and researchers.

I HAVE READ THE CONSENT FORM. MY QUESTIONS HAVE BEEN ANSWERED. MY SIGNATURE ON THIS FORM MEANS THAT I UNDERSTAND THE INFORMATION AND I CONSENT TO PARTICIPATE IN THIS STUDY. I ALSO CERTIFY THAT I AM 18 YEARS OF AGE OR OLDER.

Signature of Participant

Signature of BDE Representative

Typed/Printed
Name of Participant

Typed/Printed
Name of Researcher

Classroom Guidelines

1. Have a positive attitude.
2. Act professionally.
3. Be prepared each day for class and be on time.
4. Agree to work towards achieving a basic level of competency
5. Respect fellow classmates
6. Please raise your hands to ask questions.
7. Please turn off cell phones and pagers during class.
8. There is no smoking permitted in the CWCC building.
9. Any abuse of equipment may result in removal from program.
10. No alcohol, illegal drugs, or weapons are permitted in the CWCC building.

Failure to comply with these classroom guidelines or program guidelines will result in removal from the program. We look forward to working with you and hope you have a wonderful experience.

Parent Signature

Student Signature

Parent Printed Name

Student Printed Name

BDE Preliminary Class Survey

Student _____

Name: _____

1	Poor
2	Fair
3	Good
4	Very Good
5	Excellent

For each question below, circle the number to the right that best describes your comfort level. Use the scale above to select the number.

Question	Scale				
1. I am able to identify the parts of a computer	1	2	3	4	5
2. I am comfortable using a personal computer	1	2	3	4	5
3. I am able to connect a computer and start it	1	2	3	4	5
4. I am capable of using a Mouse	1	2	3	4	5
5. I know how to clean and properly maintain a personal computer	1	2	3	4	5
6. I am able to start applications in Windows	1	2	3	4	5
7. I am able to MOVE and SIZE a window	1	2	3	4	5
8. I am able to CUT, COPY and PASTE using Windows Explorer	1	2	3	4	5
9. I know how to connect to the Internet	1	2	3	4	5
10. I know how to SEND and RECEIVE email	1	2	3	4	5
11. I am able to search for information on the Internet (Google, Yahoo, etc...)	1	2	3	4	5
12. I am capable of starting a word processing application and typing a document	1	2	3	4	5
13. I am able to PRINT a document	1	2	3	4	5
14. I am able to SAVE a document	1	2	3	4	5

15. How many hours do you spend with your child doing the following activities per week:

_____ School (Homework)

_____ Outdoor Recreation

_____ Religious Activities

_____ Travel

BDE Preliminary Class Survey

Parent

Name: _____

For each question below, circle the number to the right that best describes your comfort level. Use the scale above to select the number.

1	Poor
2	Fair
3	Good
4	Very Good
5	Excellent

Question	Scale				
16. I am able to identify the parts of a computer	1	2	3	4	5
17. I am comfortable using a personal computer	1	2	3	4	5
18. I am able to connect a computer and start it	1	2	3	4	5
19. I am capable of using a Mouse	1	2	3	4	5
20. I know how to clean and properly maintain a personal computer	1	2	3	4	5
21. I am able to start applications in Windows	1	2	3	4	5
22. I am able to MOVE and SIZE a window	1	2	3	4	5
23. I am able to CUT, COPY and PASTE using Windows Explorer	1	2	3	4	5
24. I know how to connect to the Internet	1	2	3	4	5
25. I know how to SEND and RECEIVE email	1	2	3	4	5
26. I am able to search for information on the Internet (Google, Yahoo, etc...)	1	2	3	4	5
27. I am capable of starting a word processing application and typing a document	1	2	3	4	5
28. I am able to PRINT a document	1	2	3	4	5
29. I am able to SAVE a document	1	2	3	4	5

RELEASE AND AUTHORIZATION FORM

During the course of the Bridges to Digital Excellence (BDE) program, photographs and participant/volunteer statements are occasionally taken. Some of these pictures and statements capture the spirit of the program and opportunity may arise to use them to promote or illustrate the BDE program.

Through this release, you are authorizing the Bridges to Digital Excellence (BDE) to print, publish and display pictures and statements of yourself and / or your child to promote the BDE program through publications. Pictures, video and statements may also be used in media including TV and Radio.

I, _____, being over the age of eighteen, authorize the BDE, its employees and agents, to use/reproduce my photographic likeness / pictures, video and statements, in whole or in part, made through any medium in any medium in any BDE publication, TV or Radio.

Also, I, being the legal guardian of _____, (a minor under the age of eighteen) authorize the BDE, its employees or agents, to use/reproduce photographic likeness / pictures, video and statements, in whole or in part, made through any medium of my child, whose name is named above, in any BDE publication, TV or Radio.

Parent / Guardian / Volunteer Signature

Date

