



**Request for a refurbished Computer by a Public School
thru *Refurbished Computers for Rural Special Education***

****REFERRED BY THE IDAHO AT PROJECT**
Authorized SIGNATURE _____**

*****Computers to be Used in Resource Rooms ONLY*****

1. Complete this application and fax to 208-885-6145 or send by email to sueh@uidaho.edu.
Please call our office at 1-800-432-8324 to verify we have received your request.

Name of Requestor: _____

Your Title: _____ SD# _____

Name of School or District: _____

Address _____

City: _____ Zip Code _____

Email Address: _____

Phone: _____ Fax _____

How many Resource Rooms are in your School/District? _____

Number of desktop computers requested: _____

Do you want to connect to the internet? ()Yes () No

2. I understand:

- a. I will be contacted when my order is ready
- b. Every effort will be made to fulfill an order; some items are limited.
- c. I will be notified if CFK is not able fill my request in a timely manner
- d. I am required to provide a copy of my nonprofit verification upon pickup of order.

<i>Computer processing fee (each computer)</i>	\$165.00 X _____ = \$
<i>Speakers, needed for software programs (if available)</i>	\$ 10.00 X _____ = \$
TOTAL:	\$
FUNDED THROUGH REFURBISHED COMPUTERS for RURAL SCHOOL DISTRICTS PROGRAM with THE IDAHO ASSISTIVE TECHNOLOGY PROJECT	

I declare the information I furnished here is true, and I acknowledge all items, 1 through 2a-d.

Signed: _____ Date _____

Print Name _____