

CARES Laptop Scholarship* Request Form and Equipment Release of Liability

Please fill out this form in its entirety to request consideration to receive a laptop from the CARES Laptop Scholarship program. This form will also serve as the equipment release of liability should you be selected to receive a laptop.

Name	: Ca	mpus:	
A-Number:		Phone Number:	
enhan institu	rstand that I am being issued a laptop compute ce student achievement; it will be in my posses tion. I understand that I am responsible for the re for the equipment in such a manner as to pre	sion for use at and awa laptop computer issue	ay from the
I furth	ner understand that:		
•	The laptop should never be left inside a vehicle permanently damage the unit and/or its comp In the case of any damages or abuse of the lap district technology acceptable use policies, income be held responsible for payment of repairs or liabilities. In the event of damage, loss or theft of the lap proper authorities. I am responsible for any data corruption or constallation of unauthorized or illegal software. I am responsible for backing-up all data on the	onents or result in the otop, or because of my cluding this agreement replacement. I relinqui ptop, I am responsible onfiguration errors cau	fit. failure to follow , I understand I will ish STLCC of any for contacting the sed by the
inf	y signature below indicates I have thoroughly reformation. I further understand that submission receive a laptop from this program.		
	udent Signature:		Date:
511	LCC Representative:		Date:

*This initiative is separate from the other College services to provide laptops to students, such as our laptop loan scheme.

After completing this form, please return to financialaid@stlcc.edu