



JON J.P. FERNANDEZ  
Superintendent of Education

## DEPARTMENT OF EDUCATION OFFICE OF THE SUPERINTENDENT

[www.gdoe.net](http://www.gdoe.net)

501 Mariner Avenue

Barrigada, Guam 96913

Telephone: (671) 300-1547/1536 • Fax: (671) 472-5001

Email: [jfernandez@gdoe.net](mailto:jfernandez@gdoe.net)



### Providing Access To Homes (PATH) APPLICATION

The Guam Department of Education in collaboration with the Governor's office is providing mobile internet access for qualified families to address remote learning created by COVID-19 pandemic. This program will make it possible for qualified families to apply for and receive free internet via a MIFI device.

**For Families with multiple students per household, please complete only one application** and list the names of the students on the Student Information box on the back of this form. Submit the application to the school where your eldest child is enrolled. The school will then determine the quantity of MIFI devices to issue based on the number of students living in your household.

#### Qualifying information

##### SECTION 1 - **\*\*Voluntary\*\*** Mark 'X' if you are under any of the following programs(s):

- |  |   |
|--|---|
| <input type="checkbox"/> Economically Disadvantaged Students | <input type="checkbox"/> Children with Disabilities         |
| <input type="checkbox"/> English Learners                    | <input type="checkbox"/> Youth in Foster Care               |
| <input type="checkbox"/> Migrant Student                     | <input type="checkbox"/> Students experiencing homelessness |

**Gender:** ☐ Male ☐ Female

##### **Ethnic Background:**

- ☐ Chamorro ☐ Rota ☐ Saipan ☐ Tinian ☐ Filipino ☐ Korean ☐ Japanese ☐ Chinese  
☐ Korean ☐ Hawaiian ☐ Samoa ☐ Kosraean ☐ Pohnpeian ☐ Chuukese ☐ Yapese  
☐ Belauan ☐ Vietnamese ☐ Hispanic ☐ American Indian/Alaskan Native ☐ Indonesian  
☐ White (Non-Hispanic) ☐ African American ☐ Other Pacific Islander ☐ Other: \_\_\_\_\_

##### **Race:**

- ☐ American Indian or Alaskan Native ☐ Asian ☐ Black or African American ☐ Hispanic or Latino  
☐ Native or Other Pacific Islander ☐ White ☐ Other Ethnic/Mixed Categories

##### SECTION 2 – Capability to utilize online access.

Does/do student(s) have a personal or GDOE Laptop or tablet? ☐ Yes ☐ No

Does/do student(s) have charging capabilities at the home or access elsewhere? ☐ Yes ☐ No

***Student(s) may need to show proof of access to a qualifying device AND ability to charge/recharge devices***

**NOTE: If you marked 'x' for any of the boxes in section 1, and YES for both boxes in section 2, you are automatically qualified for 100% assistance. Please provide certification of enrollment in any of the programs listed.**

#### PARENT INFORMATION

**Parent/Guardian Name (Last, First, M.I.):**

**Phone Number (Home):**

**Phone Number (Work):**

**Phone Number (Cellular or alternate):**

**Parent/Guardian Email address:**

ONLY Students in your household				
STUDENT's		STUDENT ID #	SCHOOL	GRADE LEVEL
Last Name	First Name			

PATH AGREEMENT
<p><b>By completing and signing this application and agreement, I/We agree to:</b></p> <p><b>I. Usage</b></p> <ol style="list-style-type: none"> <li>Students must have qualified electronic devices to allow for educational access, such as a GDOE or personal laptop or tablet.</li> <li>Students must have access to charging capability (electricity).</li> <li>Regular attendance and participation in online classes are mandatory.</li> <li>Access is only for Educational Purposes which includes but not limited to communication, studying or conducting research related to schoolwork, and accessing Google Suite and other educational platforms/websites. <u>It is not meant to be used to stream TV, movies, or games.</u></li> <li>Illegal or inappropriate purposes are not allowed. If used inappropriately or for illegal use, termination of services will occur, and legal action may be taken by the proper authorities.</li> <li>Each device is for the use of the students(s) in the household as determined by this agreement.</li> </ol> <p><b>II. MIFI Device and accessories included</b></p> <ol style="list-style-type: none"> <li>Upkeep and maintain the equipment/device as instructed by the service provider.</li> </ol> <p><b>III. Modification/Suspension/ Termination of Services</b></p> <ol style="list-style-type: none"> <li>Termination of Services upon graduation – Parents must inform the school so that services (if needed) will be discontinued</li> <li>Transfer schools – Parents must inform the school so that a change in region, if necessary, shall be conducted.</li> <li>Termination/Account Suspension for Improper Use</li> <li>Irregular attendance in scheduled online classes/sessions (unexcused absences)</li> </ol>

I hereby certify that I am duly and legally authorized on behalf of the students in my household to agree to the conditions set forth in this application and agreement. The information contained herein is true, accurate, and complete.

Parent/Guardian NAME: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTICE:** PATH INTERNET IS STRICTLY FOR EDUCATIONAL USE. THE GUAM DEPARTMENT OF EDUCATION RESERVES THE RIGHT TO BLOCK OR LIMIT SITES.

**FOR OFFICIAL USE ONLY**

GOOGLE FORM INPUT BY (School Official):

NAME:

**PATH Online access No. 1:** \_\_\_\_\_

SIGNATURE:

**PATH Online access No. 2:** \_\_\_\_\_

DATE:

*(if there are 3 or more students per household)*

**ENSURE STUDENT HAS ON FILE SIGNED BP No. 379 and 836**

APPROVED BY: (Designated School Admin)

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE