Calculator Application

PARENTS: To apply for a scientific calculator needed for a math class, complete and return this form by **October 2, 2020** for the Fall semester and **February 5, 2021** for the Spring semester. Return by email, fax or mail to the information above.

Semester: Fall 20   Spring 21   Students may only apply once/academic year.

Student Name: _______________________________ Date: ________________

School: __________________________ ID #: __________________ Grade: __________

Student email: ___________________________ Student Phone #: __________________

Parent/Guardian Name: ________________________________

Parent Email Address: ___________________________ Parent Phone #: __________________

I hereby certify that all of the above information is true and correct to the best of my knowledge. I understand that I must apply each year for services provided by the NASS office. I also agree that if I abuse any assistance from NASS JOM that I forfeit my right to reapply for assistance.

__________________________________________  ________________________________________
Parent/Guardian Signature                Date                    Student Signature

Calculator Information: To be completed by Math Teacher

Calculator Description (model, brand, etc.), **NOTE: Price not to exceed $100.00.**

Is this a Scientific Calculator? _______ What class is this needed for? __________________________

Who is your teacher? ____________________________

Math Class Teacher must sign in order to confirm student’s enrollment in the class and to verify and approve what type of calculator is needed.

__________________________________________  ________________________________________
Math Teacher’s Name (please print)               Math Teacher’s email

Math Teacher’s Signature                          Date

Return this form to:  Native American Student Services, PO Box 36609, OKC, OK  73136
Email to: aagnarney@okcps.org  Fax to: 405-587-1443
For questions call: 405-587-0355