



TECHNOLOGY WORKS

EHSD COUNTY USE SECTION:

In Good Standing Date: _____

Staff Signature/PCN: _____

The Contra Costa County Employment and Human Services Department (EHSD) has implemented a computer equipment donation program for recipients of CalFresh, CalWORKs, General Assistance, and Medi-Cal in an effort to help bridge the digital divide for residents of Contra Costa County. The Technology Works Personal Computer (PC) Equipment Donation Program provides a total solution for customers of EHSD, including the PC, internet access, training, and maintenance service at "low to no" cost. Register for a chance to receive a newly refurbished computer by completing all of the following information:

Name: FIRST LAST

Address: Daytime Phone Number: Email:

CalFresh/CalWORKs/General Assistance/ Medi-Cal Case Number:
(ONLY ONE CASE NUMBER REQUIRED)

ENTRY CERTIFICATION

By completing this entry form and clicking the "submit" button below, you affirm that you meet the following conditions and are giving your permission for the Contra Costa County EHSD to share the information collected on this entry form with its selected computer vendor. This information will be used to randomly select a recipient to receive a newly refurbished computer.

- Yes, I affirm that I am currently receiving CalFresh, CalWORKs, General Assistance, and/or Medi-Cal benefits from the Contra Costa County Employment & Human Services Department.
- Yes, I affirm that my CalFresh, CalWORKs, General Assistance, and/or Medi-Cal case is currently in good standing with program requirements.
- Yes, I affirm that I will not sell the PC or PC equipment if selected to receive a newly refurbished computer.
- Yes, I understand that the Contra Costa County Employment & Human Services Department will share my information with its selected computer vendor if my case is selected to receive a newly refurbished computer. All information will be treated as confidential.

There are three ways to submit this form. By submitting this form, I certify that all of the above information is true and accurate, and that I accept all the terms of entry as stated above:

1. Drop off the signed form at a local office. (See www.ehsd.org for locations.) (Please sign below)
2. Mail the signed form to "EHSD PC ENTRY, 40 Douglas Drive, Martinez, CA 94553". (Please sign below)

Participant Signature: _____ Date: _____