

**Need a  
Desktop  
Computer?**



Community Action Partnership  
**Tech For  
Success Program**

Earn a **FREE** refurbished desktop computer by participating in two financial literacy workshops online!\*

Participants may take the two on-line classes at <https://credit.org/courses> and submit certificates with complete application checklist to: [info@capriverside.org](mailto:info@capriverside.org)

Take any two workshops from the following list:

1. Power of Paycheck Planning
2. Understanding Your Credit Score
3. Roadmap to Financial Freedom/Debt Management
4. Budget 911
5. Identity Theft

\*Participants must meet the income eligibility guidelines listed and must be Riverside County Residents.

Income-qualification is based on 200% of the Federal poverty guidelines and the number of people in the household. Assistance is based on availability of funds.

Size of Family Unit or Number in Household	Monthly Income	Annual Income
1	\$2,510.00	\$30,120.00
2	\$3,406.67	\$40,880.00
3	\$4,303.33	\$51,640.00
4	\$5,200.00	\$62,400.00
5	\$6,096.67	\$73,160.00
6	\$6,993.33	\$83,920.00
7	\$7,890.00	\$94,680.00
8	\$8,786.67	\$105,440.00
9+	\$116,200.00	
	Add \$10,760 for each additional person.	

**FOR MORE INFO CONTACT**  **LILLY M. CARDOZA**  
(951) 955-4900  
[LillyMarie@capriverside.org](mailto:LillyMarie@capriverside.org)



# Community Action Partnership DESKTOP PROGRAM



## Overview

The CAP Program is a CSBG funded program to assist Riverside County families with technology assistance to help bridge the digital divide.

**Application Checklist:** Incomplete applications will delay the processing time. Please double check all 4 items are included and complete.

- Application:** Please complete the attached application. Do not forget to sign and date the application at the bottom.
- Income:** Please include a copy of the last 4 weeks.
- Identification:** Please include a copy of your photo ID. This can be a government issued ID, consular identification card, student ID, or passport.
- Certificates:** Please complete 2 classes listed below at [www.credit.org](http://www.credit.org) and include a copy of the certificates with your application.
  - Power of Paycheck Planning
  - Understanding Your Credit Score
  - Roadmap to Financial Freedom/Debt management
  - Budget 911
  - Identity Theft

## Requirements and Eligibility

- ✓ Reside in Riverside County
- ✓ Be 18+ years old
- ✓ Submit a form of identification (government issued ID, consular identification card, student ID, or passport)
- ✓ Copy of 2 Credit.org certificates
- ✓ One per household

You may submit your application and required documents the following ways:

**Email:** [info@capriverside.org](mailto:info@capriverside.org)

**Mail:**

Community Action Partnership  
Attn: Tech for Success  
2038 Iowa Ave Ste B-102  
Riverside, CA 92507

**In person at any of our CAP offices located at:**

**Riverside:** 2038 Iowa Ave. B-102  
Riverside, CA 92507

**Hemet:** 749 N State St.  
Hemet, CA 92453 (Drop box only)

Income-qualification is based on 200% of the Federal poverty guidelines and the number of people in the household.

\*Assistance based on availability of funds and inventory.

Size of Family Unit or Number in Household	Monthly Income	Annual Income
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7	\$7,890.00	\$94,680.00
8	\$8,786.67	\$105,440.00
9+	\$116,200.00	Add \$10,760 for each additional person.

**Desert Hot Springs:** 14320 Palm Dr.  
DHS, CA 92240 (Drop box only)

**Blythe:** 260 N. Broadway  
Blythe, CA 92225



# Community Action Partnership DESKTOP PROGRAM APPLICATION



**HWS** HOUSING AND  
WORKFORCE  
SOLUTIONS  
ENGAGE. ENCOURAGE. EQUIP.

## Section 1 Applicant Information

Full Name: \_\_\_\_\_  
*Last First M.I.*

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_ *City State Zip*

Date of Birth: \_\_\_\_\_ Phone: \_\_\_\_\_

Email: \_\_\_\_\_

Household size: \_\_\_\_\_ Total household income: \_\_\_\_\_

Have you received a computer from CAP before? \_\_\_\_\_

How did you hear about CAP? \_\_\_\_\_

Do you need help with internet? Yes  No

## Section 2 Applicant Signature

1. I hereby authorize the Community Action Partnership to review income, and other documents pertinent to my application for assistance.
2. I certify under penalty of perjury that all information herein is true and correct to the best of my knowledge.
3. I certify that the total household income for the above individual does not exceed the 200% Federal poverty guidelines indicated on page 1.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Classes may be found at [www.Credit.org/courses](http://www.Credit.org/courses)  
\*Assistance is based on the availability of funds, inventory, and income qualifications.  
Submit your completed application and required documents to:  
**info@capriverside.org**