



## Apply for the Affordable Connectivity Program Online

The Affordable Connectivity Program (ACP) is a U.S. government program to help low-income households pay for internet service and connected devices such as a desktop, laptop, or tablet.

If your household is eligible, you could receive:

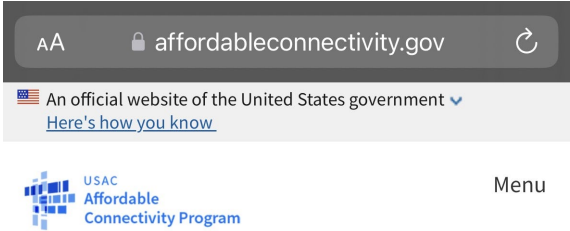
- Up to a \$30 per month discount on your internet service
- Up to a \$75 per month discount if your household is on qualifying Tribal lands
- A one-time discount of up to \$100 for a laptop, tablet, or desktop computer (with a co-payment of more than \$10 but less than \$50) from a participating internet company

Once your application is approved, the next step is to contact a participating internet company to get your benefit.

### Get Started

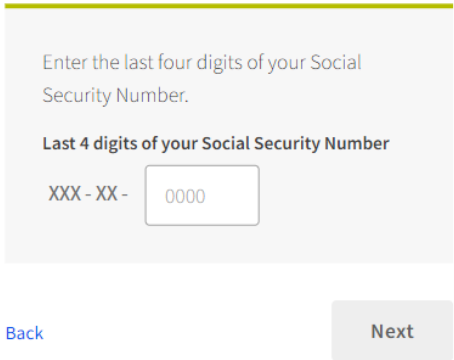
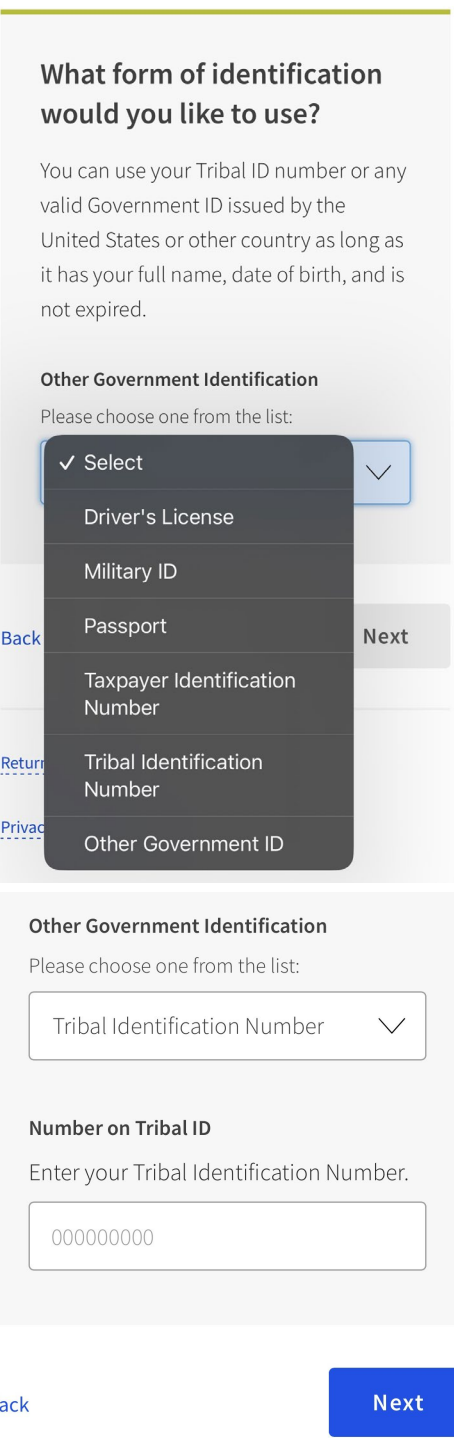
Follow the steps below to submit an ACP application online, which typically takes about 10 minutes to complete. You may need to provide additional information or documentation to confirm your eligibility, identity, or home address.

If you have questions during the application process, contact the ACP Support Center by email at [ACPSupport@usac.org](mailto:ACPSupport@usac.org) or call (877) 384-2575 from 9 a.m. to 9 p.m. ET.

	Steps	Online Application Overview
1	<p>Tap or click on a web browser on your mobile device or computer.</p> <ul style="list-style-type: none"> <li>• Type <a href="https://affordableconnectivity.gov">AffordableConnectivity.gov</a> in the web address bar and press <b>Enter</b> on the keyboard or <b>Go/Search</b> on your mobile device to open the website.</li> </ul>	
2	<p>Tap or click <b>Apply Now</b>.</p>	<p><b>Stay Connected</b></p> <p>The Affordable Connectivity Program (ACP) is a U.S. government program that helps many low income households pay for broadband service and internet connected devices.</p> <p><a href="#">Apply Now</a> <a href="#">Recertify</a></p>

<p><b>3</b></p>	<p>Read about helpful tips and learn more about how your information will be used.</p> <ul style="list-style-type: none"> <li>• Tap or click <b>Next</b> to get started with your application.</li> </ul>	<h2>Affordable Connectivity Program Application</h2> <hr/> <div style="background-color: #f0f0f0; padding: 10px;"> <h3>Before you get started</h3> <p>The personal information you enter will be used to see if you qualify for a discount on your internet. This information will only be used to find out if you qualify.</p> <ul style="list-style-type: none"> <li>▪ Verify your identity using the <b>last four digits of your Social Security Number</b>, a Tribal ID number, or other government ID (Driver's License, Passport, etc.). Providing a Social Security Number may reduce the need to provide extra documentation.</li> <li>▪ Enter an <b>email address</b> so we can contact you.</li> </ul> </div> <div style="text-align: right; margin-top: 20px;"> <input type="button" value="Next"/> </div>
<p><b>4</b></p>	<p>Fill out your home address and contact information.</p> <ul style="list-style-type: none"> <li>• Type in your home address. <ul style="list-style-type: none"> <li>○ This <b>cannot</b> be a P.O. Box.</li> </ul> </li>   <li>• Tap or click the checkbox to enter in a mailing address if it's different from your home address. <ul style="list-style-type: none"> <li>○ This <b>can</b> be a P.O. Box.</li> </ul> </li> </ul>	<h2>Fill out your information</h2> <hr/> <div style="background-color: #f0f0f0; padding: 10px;"> <h3>Home address where you will get internet</h3> <p>It cannot be a P.O. Box.</p> <p><b>Street Number and Name</b></p> <input type="text" value="Street Number and Name"/> <p><b>Apartment, Unit, etc.</b></p> <input type="text" value="Apt, Unit, etc."/> <p><b>City or Town</b></p> <input type="text" value="City or Town"/> <p><b>State or Territory</b></p> <input type="text" value="State"/> <p><b>Zip Code</b></p> <input type="text" value="00000"/> <p><input type="checkbox"/> My mailing address is different than my home address.</p> </div>

<p><b>4a</b></p>	<p>Fill out your contact information.</p> <ul style="list-style-type: none"> <li>• Type in your email address. <ul style="list-style-type: none"> <li>○ Notifications about your application will go to the email address that you provide.</li> </ul> </li> <li>• Type in your phone number (optional).</li> <li>• Tap or click <b>Next</b>.</li> </ul>	<div style="border: 1px solid #ccc; padding: 10px;"> <h3>Contact information</h3> <p>Please provide the best email address to receive important reminders about your application.</p> <p><b>Email Address</b></p> <input type="text" value="email@email.com"/> <p><b>Phone (optional)</b></p> <input type="text" value="(000) 000-0000"/> <p>By providing a phone number, you consent to letting USAC contact you at that phone number via artificial or prerecorded voice message or text for important reminders and updates about your ACP benefit. For text messages, message and data rates may apply. Text STOP to end messages.</p> <p style="text-align: right;"> <a href="#">Back</a> <span style="float: right; border: 1px solid #ccc; padding: 2px 10px;">Next</span> </p> </div>
<p><b>5</b></p>	<p>Do you want us to check your identity with the last four digits of your Social Security Number?</p> <ul style="list-style-type: none"> <li>• <b>Yes</b> - Tap or click <b>Next</b>. <ul style="list-style-type: none"> <li>○ Go to <a href="#">step 5a</a> to type in your Social Security Number.</li> </ul> </li> <li>• <b>No</b> - Tap or click <b>No</b>, then <b>Next</b>. <ul style="list-style-type: none"> <li>○ Go to <a href="#">step 5b</a> to type in your Tribal ID number.</li> <li>○ Go to <a href="#">step 5c</a> for instructions on how to provide an official document.</li> </ul> </li> </ul>	<div style="border: 1px solid #ccc; padding: 10px;"> <h2 style="color: #4a90e2;">Fill out your information</h2> <p>We'll use this information to see if you are eligible. It won't affect your credit.</p> <div style="border: 1px solid #ccc; padding: 10px; margin-top: 10px;"> <h3>Do you want us to check your identity with your Social Security Number?</h3> <p>Using the last four digits of your Social Security Number will help speed up your application process and may avoid you having to provide extra documentation.</p> <ul style="list-style-type: none"> <li><input checked="" type="radio"/> Yes, use the last four digits of my Social Security Number.</li> <li><input type="radio"/> No, I want to provide an official document (Driver's License, Passport, etc.) or use my Tribal ID number.</li> </ul> </div> <p style="text-align: right;"> <a href="#">Back</a> <span style="float: right; border: 1px solid #4a90e2; padding: 5px 15px; color: white;">Next</span> </p> </div>

<p><b>5a</b></p>	<p>Type in the last four digits of your Social Security Number and tap or click <b>Next</b>.</p>	 <p>Enter the last four digits of your Social Security Number.</p> <p><b>Last 4 digits of your Social Security Number</b></p> <p>XXX - XX - 0000</p> <p><a href="#">Back</a> <a href="#">Next</a></p>
<p><b>5b</b></p>	<p>Select <b>Tribal Identification Number</b> from the drop-down.</p> <ul style="list-style-type: none"> <li>Type in your Tribal ID number.</li> <li>Tap or click <b>Next</b>.</li> </ul>	 <p><b>What form of identification would you like to use?</b></p> <p>You can use your Tribal ID number or any valid Government ID issued by the United States or other country as long as it has your full name, date of birth, and is not expired.</p> <p><b>Other Government Identification</b></p> <p>Please choose one from the list:</p> <p> <input checked="" type="checkbox"/> Select  <input type="checkbox"/> Driver's License  <input type="checkbox"/> Military ID  <input type="checkbox"/> Passport  <input type="checkbox"/> Taxpayer Identification Number  <input checked="" type="checkbox"/> Tribal Identification Number  <input type="checkbox"/> Other Government ID </p> <p><a href="#">Back</a> <a href="#">Next</a></p> <p><a href="#">Return</a> <a href="#">Privacy</a></p> <p><b>Other Government Identification</b></p> <p>Please choose one from the list:</p> <p>Tribal Identification Number</p> <p><b>Number on Tribal ID</b></p> <p>Enter your Tribal Identification Number.</p> <p>00000000</p> <p><a href="#">Back</a> <a href="#">Next</a></p>

**5c** Select the **form of identification** you'd like to use from the drop-down.

- Tap or click **Select Photo** to attach a copy of your identification.
  - The options to attach your identification will vary based on your device.
  - You will receive a success message after you attach your identification.
- Tap or click **Next**.

**What form of identification would you like to use?**

You can use your Tribal ID number or any valid Government ID issued by the United States or other country as long as it has your full name, date of birth, and is not expired.

**Other Government Identification**  
Please choose one from the list:

✓ Select  
Driver's License  
Military ID  
Passport  
Taxpayer Identification Number  
Tribal Identification Number  
Other Government ID

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**Other Government Identification**  
Please choose one from the list:

Driver's License

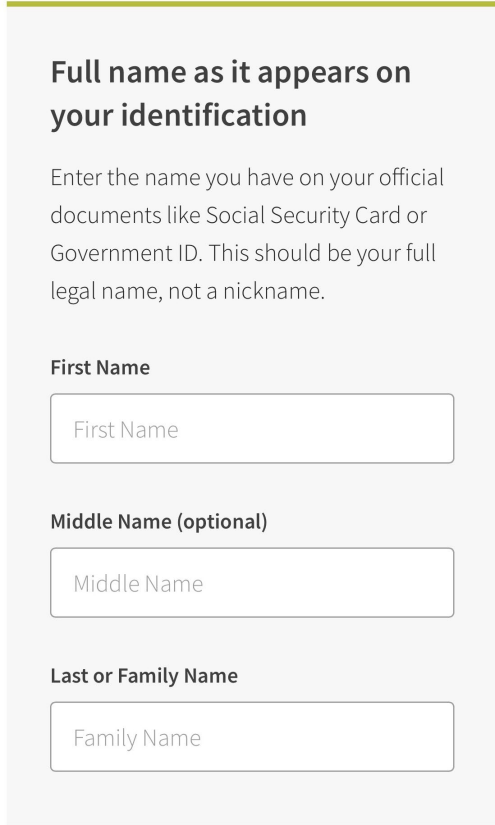
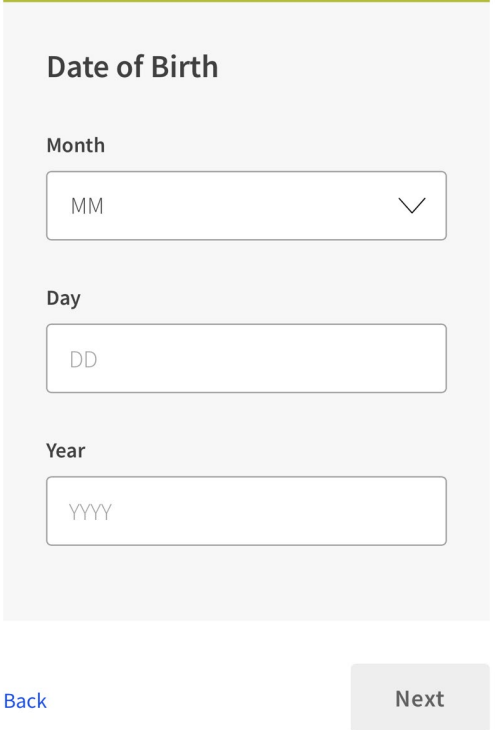

**Attach photo of the ID**  
Please attach a scanned copy or picture of your form of identification. Files must be less than 10 MB and one of the following file types: jpg, jpeg, png, pdf, or gif.

Select Photo

✓ Congratulations on successfully uploading your photo.

FA351EE2-9... (210767) X

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<b>6</b>	Type in your full first and last name as it appears on your official documents, like a Social Security Card or government ID.	 <p><b>Full name as it appears on your identification</b></p> <p>Enter the name you have on your official documents like Social Security Card or Government ID. This should be your full legal name, not a nickname.</p> <p><b>First Name</b></p> <input type="text" value="First Name"/> <p><b>Middle Name (optional)</b></p> <input type="text" value="Middle Name"/> <p><b>Last or Family Name</b></p> <input type="text" value="Family Name"/> <p><a href="#">Back</a> <input type="button" value="Next"/></p>
<b>6a</b>	Fill out your date of birth. <ul style="list-style-type: none"><li>• Select the month from the drop-down.</li><li>• Type in the day.</li><li>• Type in the year.</li><li>• Tap or click <b>Next</b>.</li></ul>	 <p><b>Date of Birth</b></p> <p><b>Month</b></p> <input type="text" value="MM"/>  <p><b>Day</b></p> <input type="text" value="DD"/> <p><b>Year</b></p> <input type="text" value="YYYY"/> <p><a href="#">Back</a> <input type="button" value="Next"/></p>

<p><b>7</b></p>	<p>Do you participate in Medicaid or the Supplemental Nutrition Assistance Program (SNAP)?</p> <ul style="list-style-type: none"> <li>• <b>Yes</b> - Tap or click <b>Next</b>. <ul style="list-style-type: none"> <li>○ Go to <a href="#">step 8</a> to continue.</li> </ul> </li> <li>• <b>No</b> - Tap or click <b>No</b>, then <b>Next</b>. <ul style="list-style-type: none"> <li>○ Go to <a href="#">step 7a</a> if you qualify another way.</li> </ul> </li> </ul>	<h2 style="color: #4F81BD;">Confirm your program participation</h2> <div style="border: 1px solid #ccc; padding: 10px; margin: 10px 0;"> <p><b>Do you participate in Medicaid or the Supplemental Nutrition Assistance Program (SNAP)?</b></p> <p>If you do not participate in either of these programs you may still be eligible. We'll just need to ask a few more questions.</p> <p><input checked="" type="radio"/> Yes, I think I participate in Medicaid and/or SNAP.</p> <p><input type="radio"/> No, I do not think I participate in Medicaid and/or SNAP and want to qualify another way.</p> </div> <p style="text-align: right;"> <a href="#">Back</a> <span style="background-color: #4F81BD; color: white; padding: 5px 15px; border-radius: 5px; margin-left: 20px;">Next</span> </p>
<p><b>7a</b></p>	<p>Do you participate in another program or qualify through your income?</p> <ul style="list-style-type: none"> <li>• <b>Yes</b> - Tap or click the check box next to all that apply. <ul style="list-style-type: none"> <li>○ Tap or click <b>Next</b>.</li> <li>○ Go to <a href="#">step 8</a> to continue.</li> </ul> </li> <li>• <b>No</b> - Tap or click the last check box if your child or dependent may qualify. <ul style="list-style-type: none"> <li>○ Go to <a href="#">step 7b</a> if your child or dependent who may qualify.</li> </ul> </li> </ul>	<div style="border: 1px solid #ccc; padding: 10px; margin: 10px 0;"> <p><b>Which of the following programs do you participate in?</b></p> <p><b>Check all that apply.</b></p> <p><input type="checkbox"/> Federal Pell Grant</p> <p><input type="checkbox"/> Veterans Pension and Survivors Benefit Programs</p> <p><input type="checkbox"/> Federal Housing Assistance (?)</p> <p><input type="checkbox"/> Supplemental Security Income (SSI)</p> <p><input type="checkbox"/> Special Supplemental Nutrition Program for Woman, Infants, and Children (WIC)</p> <p><input type="checkbox"/> Tribal Specific Program (Only choose if you live on Tribal lands)</p> <p><input type="checkbox"/> I don't think I participate in any of these programs, I may qualify through my income</p> <p><input type="checkbox"/> I don't participate in any of these, but I have a child or dependent who may qualify</p> </div> <p style="text-align: right;"> <a href="#">Back</a> <span style="background-color: #ccc; padding: 5px 15px; border-radius: 5px; margin-left: 20px;">Next</span> </p>

**7b**

Does your child or dependent participate in a qualifying program?

- Tap or click the check box next to all that apply.
- Tap or click **Next**.
  - Go to [step 7c](#) to continue.

Which of the following programs does your child or dependent participate in?

Check all that apply.

- SNAP (Supplemental Nutrition Assistance Program) or Food Stamps
- Medicaid
- Free and Reduced-Price School Lunch or Breakfast Program
- USDA Community Eligibility Provision (CEP) School
- Veterans Pension and Survivors Benefit Programs
- Federal Housing Assistance [?](#)
- Supplemental Security Income (SSI)
- Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- Tribal Specific Program (Only choose if they live on Tribal lands)
- I don't think my child or dependent participates in any of these programs, but may qualify through income

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**7c** Fill out your child or dependent's information.

You'll need to:

- Verify your child or dependent's identity using the last four digits of their Social Security Number, a Tribal ID number, or by attaching a copy of their identification.
- Fill out their first and last name.
- Fill out their date of birth.
- Tap or click **Next**.
  - Go to [step 8](#) to continue.

**Do you want us to check your child or dependent's identity with their Social Security Number?**

Using the last four digits of their Social Security Number will help speed up your application process and may avoid you having to provide extra documentation.

- Yes, use the last four digits of my child or dependent's Social Security Number.
- No, I want to provide an official document (Driver's License, Passport, etc.) or use a Tribal ID number.

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**Your child or dependent's full name as it appears on their identification**

Enter the name of your child or dependent as it appears on official documents like their Social Security Card or Government ID. This should be their full legal name, not a nickname.

**First Name**

First Name

**Middle Name (optional)**

Middle Name

**Last or Family Name**

Family Name

**Date of Birth**

**Month**

MM

**Day**

DD

**Year**


YYYY

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8

## Review your information.

- Review the information you provided. If you need to correct your information, tap or click  **Edit** and make any edits.
- Review the consent statement to confirm the information you provided will be used to check if you are eligible.
- Tap or click **Check my eligibility**.
  - It may take a few minutes to check your information against available automated databases.

## Review your information

Please review the information you provided and make any edits.

### Your Information Edit

Name  
**Francine Tester**

Home Address  
**123 Main Street  
Town, PA 11111**

Mailing Address  
**Same**

Date of Birth  
**1/01/1970**

Phone (optional)  
**Not Provided**

Email Address  
**email@email.com**

### Your ID

Last four digits of your Social Security Number  
**XXX-XX-1111**

The information you provided will be used to check if you are eligible for the Affordable Connectivity Program (ACP).

By submitting this form, you agree to the [National Verifier terms and conditions](#) and consent that all information you are providing (including any information you may be providing on behalf of another member of your household) may be collected, used, shared, and retained for the purpose of applying for and/or receiving the Affordable Connectivity Program benefit.

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[Check my eligibility](#)

9 You'll find out right away if you qualify to get a benefit or if we need more information to see if you qualify.

### What to do next to save your information and continue your application.

If you need to **create an account**

- Tap or click **Create account**.
- Type in a username. It can be an email address or a unique ID.
- Type in a password that is a mix of letters, numbers, and symbols.
- Type in the same password again.
- Tap or click the **I'm not a robot** checkbox.
- Tap or click **Create account and sign in**.

If you already have an account, **sign in**

- Tap or click **Sign in**.
- Type in your username.
- Type in your password.
- Type the same password again.
- Tap or click **Sign in**.

ⓘ **If you need to leave and come back to complete this step later, you'll need to enter in your information again.** We will send a reminder to the email you provided on your application.

### You qualify to get your benefit

Affordable Connectivity Program benefits:

- Service discount up to \$30/month
- Service discount up to \$75/month on qualifying Tribal lands
- Device discount up to \$100 for a qualifying device

#### What to do next

Create an account with a username and password to save the details you already entered and learn how to get your benefit.

Create account

#### Create your account

You need to create an account to save your information and continue your application.

##### Username

This could be an email address or unique ID.

email@email.com

##### Create a password

Choose something that is a mix of letters, numbers, and symbols. Write down your password and keep it in a safe location because you will need to use it again.

- At least 8 characters long
- At least 1 capital letter
- At least 1 number (0-9)
- At least 1 special character (!@#%&\*')
- No restricted phrases ⓘ

password

Show password

##### Confirm password

Type the same password again.

password

Show password

I'm not a robot



Create account and sign in

### We need more information to see if you qualify

A few things happened:

- We couldn't find your address, so you'll need to show us where you live on a map.
- We couldn't confirm your eligibility, so you'll need to attach a photo of a document that shows you participate in a government assistance program or your income.

#### What to do next

It looks like you already have an account. Sign in to save your information.

Then, we'll help you provide the extra information to see if you qualify.

Sign in

#### Sign in

##### Username

This could be your email address or unique ID.

email@email.com

Forgot your username?

##### Password

password

Show password

Forgot your password?

I'm not a robot



Sign in

**10** Finish your application.

Did we ask you to provide additional information or documentation?

- **Yes** - Go to the [Show You Qualify](#) section to continue your application.
- **No** - Your last step is to review the certification statements.
  - Read the statements.
  - Type your first and last name to confirm you agree with the statements.
  - Tap or click **Submit**.
  - Go to [step 11](#) to continue.

By signing your name below, you agree with the following statements:

**Qualifications**

I or someone in my household currently gets benefits from a program that qualifies for the Affordable Connectivity Program, or my annual household income is 200% or less than the Federal Poverty Guidelines.

**Internet company notification**

I understand that I must tell my internet company within 30 days:

- if my household no longer qualifies for the Affordable Connectivity Program or
- if I move to a new address.

**Only one benefit per household allowed**

I understand that my household can only receive one monthly service benefit and one device discount (desktop, laptop, or tablet) through the Affordable Connectivity Program, and to the best of my knowledge, my household is not getting more than one service benefit and one device discount.

**Potential impact on your bill if program ends**

I understand that the Affordable Connectivity Program is a federal government benefit that reduces my internet service bill, and my household will be subject to the internet company's undiscounted general rates, terms, and conditions if my household continues to subscribe to the service after the conclusion of the Affordable Connectivity Program.

**How your information will be used**

I agree that all of the information I provide on this form may be collected, used, shared, and retained by the Affordable Connectivity Program Administrator (Universal Service Administrative Company) for the purposes of applying for and/or receiving the Affordable Connectivity Program benefit.

- I agree that my state or Tribal government may share information about my benefits for a qualifying program with the Affordable Connectivity Program Administrator if required by law and this information will be used only to help find out whether I can get an Affordable Connectivity Program benefit.

**Check eligibility at any time**

The Affordable Connectivity Program Administrator or my service provider may check whether I still qualify at any time.

**Must meet recertification deadline**

In order to confirm that I still qualify for the Affordable Connectivity Program benefit, I understand that I have to respond to a recertification request by the deadline or I will be removed from the Affordable Connectivity Program and my benefit will stop.

I certify, under penalty of perjury, that all of the information provided on this form is true and correct to the best of my knowledge. I know that willingly giving false or fraudulent information to get Affordable Connectivity Program benefits is punishable by fine and/or imprisonment under 18 U.S.C. §1001 and can result in being barred from the Affordable Connectivity Program.

**Your Signature**

**Type your name below**

Francine Tester

I understand this is a digital signature, and this is the same as if I signed my name with a pen.

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[Submit](#)

**11**

Contact a participating internet company to get your benefit.

- [Contact a participating internet company](#) to start receiving your ACP benefit.
- Sign up by the deadline or you will need to re-apply.
- We will also send this information to the email you provided on your application.

## Contact an internet company to get your benefit

You're approved to get your benefit. **Sign up by June 26, 2023.**

### What to do next

#### If you already have internet

Contact your internet company and say, "I have been approved for the Affordable Connectivity Program and would like to apply it to my service." Then, give them the information below.

#### If you don't currently have internet

[Find an internet company](#) that can provide service to your address and say, "I have been approved for the Affordable Connectivity Program and would like to sign up for internet." Then, give them the information below.

Application ID:  
**B11111-BBBBB**

Full legal name:  
**Francine Tester**

Address:  
**123 Main Street,  
TOWN, PA 11111**

Method of identity verification:  
**Last 4 digits of SSN**

We have sent this information to the email you provided on your application.

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Do you live on Tribal lands? +



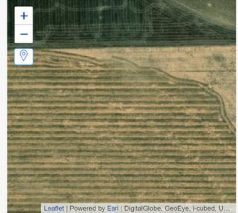

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Need to find an internet company near you? +

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## Show You Qualify

You may need to provide additional information or documentation if we cannot confirm your eligibility, identity, or address. This section includes information on the steps you take to confirm your information if you encounter these questions in your online application. For more information, review our Acceptable Documentation Guide (available in [English](#) and [Spanish](#)).

Information or Documentation Needed	Online Application Overview
<h3>Confirm Your Address</h3> <p>You may be asked to confirm your address by locating where you live on the map.</p> <ul style="list-style-type: none"><li>If you need to correct your address, tap or click <b>fix it here</b>.</li></ul> <h3>Show us where you live</h3> <ul style="list-style-type: none"><li>To locate where you live, double click on the map, or use the (+) button to zoom in.<ul style="list-style-type: none"><li>Tap or click the  icon to expand the How to Find Your Address section and view a short video.</li></ul></li><li>Tap or click on the pin once you have found your address on the map.</li><li>Tap or click <b>Next</b>.</li></ul>	<h3>Confirm Your Location</h3> <p>Show us that your address is right.</p> <p>This is the information you gave us.</p> <div data-bbox="1039 588 1307 672"><p>Address: 123 NOT REAL ROAD, TOWN, DC 12345</p></div> <p><small>If you see a typo in your address, <a href="#">fix it here</a>.</small></p> <p><small>You have until <b>5/14/2023</b> to confirm your address. If you miss the deadline, you will need to submit a new application.</small></p> <h4>How to Find Your Address </h4> <div data-bbox="1039 850 1307 1354"><p>Confirm where you live by double clicking on the map or use the (+) button to zoom in. Drop a pin once you find your address.</p><p><small>Leaflet   Powered by Esri   DigitalGlobe, GeoEye, iSatellite, U...</small></p><p><small>If you do not zoom in enough, you will not be able to drop a pin.</small></p><p>Latitude <input type="text"/></p><p>Longitude <input type="text"/></p><p><small>Note: If you live on Tribal lands, this information will be used to confirm you qualify for the enhanced Tribal benefit.</small></p><p><b>Next</b></p></div>
<h3>Confirm Your Household Qualifies</h3> <p>You may be asked to confirm that your household qualifies for the Affordable Connectivity Program benefit.</p> <p> Only one monthly benefit is allowed per household. A household is a group of people who live together and share money even if they are not related to each other.</p> <ul style="list-style-type: none"><li>Answer the questions.</li><li>Tap or click <b>Next</b>.</li></ul>	<h3>Confirm Your Household</h3> <p>We need more information about your household.</p> <p>You have until <b>5/14/2023</b> to complete this section. If you miss the deadline, you will need to submit a new application.</p> <div data-bbox="1015 1627 1331 1900"><p>Do you share money (income and expenses) with another adult who gets the Affordable Connectivity Program benefit?</p><p><small>This can be the cost of bills, food, income, etc. If your spouse receives the Affordable Connectivity Program benefit, please answer "Yes" to this question.</small></p><p><input type="radio"/> Yes <input type="radio"/> No</p></div> <p><b>Back</b> <b>Next</b></p>

## Confirm Your Identity

You may be asked to upload documents that confirm your identity information.

- If you need to correct your identity information, tap or click **fix it here**.

### If you need to confirm your date of birth,

- Provide a copy of an unexpired official document, such as a driver's license, that has your first and last name and date of birth.

### If you need to confirm your Social Security Number or Tribal ID\*

- Provide a copy of an unexpired official document, such as a Social Security Card or Tribal ID, that includes your first and last name and the last 4 digits of your SSN or full Tribal ID.
  - \*If you did not provide the last 4 digits of your Social Security Number or your Tribal ID on your application, verify your identity using another form of identification such as a driver's license, military ID, passport, taxpayer identification number (ITIN) document, or other government ID.
- Tap or click **Choose File** to attach a copy or photo of the document you will use to confirm your identity information.
- Tap or click **Next**.

## Confirm Your Identity

We couldn't confirm your identity information.

This is the information you gave us.

Full Legal Name:	Francine Tester
Date of Birth:	January 1, 1990
Last 4 SSN:	1234

If you see a typo in your information, [fix it here](#).

You have until **5/14/2023** to provide documentation to confirm your identity. If you miss this deadline, you will need to submit a new application.

Provide documentation that includes:

- Your first and last name
- Your date of birth
- The last four digits of your SSN or Tribal ID number\*

① \*If you did not provide the last four digits of your Social Security Number or Tribal ID number with your application, you must provide a Driver's License, Military ID, Passport, Taxpayer Identification Number (ITIN) Document, or other Government ID.

Show us one document:

Provide one document that includes your first and last name, date of birth, and last four digits of your SSN or full Tribal ID number.\*

Document examples:

- U.S. government, military, state, or Tribal issued ID (unexpired)
- Military discharge documentation
- Weapons permit (unexpired)
- Government assistance program document (that includes proof of identity)
- Statement of benefits from a qualifying program (that includes proof of identity)
- Unemployment or worker's compensation statement of benefits

Or show us two documents:

Provide two documents to confirm your first and last name, date of birth, and last four digits of your SSN or full Tribal ID number.\*

Show your date of birth

- Driver's license (unexpired)
- Birth certificate
- Passport (unexpired)
- Certificate of Naturalization (or Certificate of U.S. Citizenship)
- Permanent Resident Card (unexpired)

Show the last four digits of your SSN or full Tribal ID number

- Social Security card
- Social Security Benefit Statement (SSA-1099)
- W-2
- Prior year's state, federal, or Tribal tax return

### Upload your documents

- You can use the following file types: .jpg, .jpeg, .png, .pdf, or .gif
- Make sure that your file is not too large. The size limit is 10MB.
- If you are using a phone, you can take a photo of your document and upload it.

Choose file

Willingly giving false or fraudulent information to get Lifeline or ACP benefits is punishable by law and can result in fines, jail time, de-enrollment, or being barred from the program.

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## Confirm You Qualify

You may also be asked to upload documents that confirm your eligibility (such as your income or participation in a government program).

- Choose how you qualify.
- Tap or click **Next**.

### If you qualify based on your household income

- Provide documentation, such as a prior year's state tax return, that includes your (or your dependent's) first and last name, your annual income, and an issue date within the last 12 months.

### If you participate in one of the qualifying assistance programs

- Provide documentation, such as a benefit award letter or statement, that includes your (or your dependent's) first and last name, the name of the qualifying program (such as SNAP), the name of the government, Tribal entity, program administrator that issued the document, and an issue date within the last 12 months or a future expiration date.
  - **If you participate in the Free and Reduced-Price School Lunch Program or School Breakfast Program**, documents such as a letter from the school must be from the current school year or the school year immediately preceding the application.
  - **For enrollment in a CEP school**, documents must include the student's name, the relevant school year, the name and address of the school, and contact information (phone or email) for the school and show that the student is enrolled in a CEP school for the relevant school year. (The student must still be enrolled at the time of the application.)
  - **For Federal Pell Grants**, documents must be from the student's school or the Department of Education and must show that the student has received a Pell Grant for the current award year.
- Tap or click **Choose File** to attach a copy or photo of the document you will use to confirm your identity information.
- Tap or click **Next**.

## We Could Not Confirm Your Eligibility

ⓘ You have until 5/14/2023 to provide documentation to confirm your eligibility. If you miss this deadline, you will need to submit a new application.

If you think you may have entered any of your information (such as a name, date of birth, or address) incorrectly, or would like to add a child or dependent, [fix it here](#).

Are you or someone in your household in any of these?

Choose one.

- SNAP (Supplemental Nutrition Assistance Program) or Food Stamps ⓘ
- Medicaid
- Supplemental Security Income (SSI)
- Federal Housing Assistance
- Veterans Pension and Survivors Benefit Programs
- Federal Pell Grant in the current award year
- Free and Reduced-Price School Lunch or Breakfast Program, or enrollment in a USDA Community Eligibility Provision School in the current school year
- Special Nutrition Program for Women, Infants, and Children (WIC)
- Tribal Specific Program (only choose if you live on Tribal lands)
- I don't participate in one of these programs, I want to qualify through my income.

### Document Requirements

Provide a document that includes:

- Your name, or your dependent's name
- The name of the qualifying program, such as SNAP
- The name of the government, Tribal entity, or program administrator that issued the document
- An issue date within the last 12 months or expiration date (in the future)

Document examples:

- Benefit award letter
- Statement of benefits
- Benefit verification letter
- Screenshot of online benefits portal

### Upload your documents

- You can use the following file types: .jpg, .jpeg, .png, .pdf, or .gif
- Make sure that your file is not too large. The size limit is 10MB.
- If you are using a phone, you can take a photo of your document and upload it.

Choose file

App\_Qualifi... (434428) X

Willingly giving false or fraudulent information to get Lifeline or ACP benefits is punishable by law and can result in fines, jail time, de-enrollment, or being barred from the program.

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After you submit your information or documentation, the final step is to certify and sign the application form.

- Read the statements.
- Type your first and last name to confirm you agree with the statements.
- Tap or click **Submit**.

By signing your name below, you agree with the following statements:

**Qualifications**

I or someone in my household currently gets benefits from a program that qualifies for the Affordable Connectivity Program, or my annual household income is 200% or less than the Federal Poverty Guidelines.

**Internet company notification**

I understand that I must tell my internet company within 30 days:

- if my household no longer qualifies for the Affordable Connectivity Program or
- if I move to a new address.

**Only one benefit per household allowed**

I understand that my household can only receive one monthly service benefit and one device discount (desktop, laptop, or tablet) through the Affordable Connectivity Program, and to the best of my knowledge, my household is not getting more than one service benefit and one device discount.

**Potential impact on your bill if program ends**

I understand that the Affordable Connectivity Program is a federal government benefit that reduces my internet service bill, and my household will be subject to the internet company's undiscounted general rates, terms, and conditions if my household continues to subscribe to the service after the conclusion of the Affordable Connectivity Program.

**How your information will be used**

I agree that all of the information I provide on this form may be collected, used, shared, and retained by the Affordable Connectivity Program Administrator (Universal Service Administrative Company) for the purposes of applying for and/or receiving the Affordable Connectivity Program benefit.

- I agree that my state or Tribal government may share information about my benefits for a qualifying program with the Affordable Connectivity Program Administrator if required by law and this information will be used only to help find out whether I can get an Affordable Connectivity Program benefit.

**Check eligibility at any time**

The Affordable Connectivity Program Administrator or my service provider may check whether I still qualify at any time.

**Must meet recertification deadline**

In order to confirm that I still qualify for the Affordable Connectivity Program benefit, I understand that I have to respond to a recertification request by the deadline or I will be removed from the Affordable Connectivity Program and my benefit will stop.

I certify, under penalty of perjury, that all of the information provided on this form is true and correct to the best of my knowledge. I know that willingly giving false or fraudulent information to get Affordable Connectivity Program benefits is punishable by fine and/or imprisonment under 18 U.S.C. §1001 and can result in being barred from the Affordable Connectivity Program.

**Your Signature**

**Type your name below**

Francine Tester

I understand this is a digital signature, and this is the same as if I signed my name with a pen.

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[Submit](#)

You have submitted your application!

You will receive a message that says we are checking your documents.

After we review your documents, you will receive an email about the status of your application. You can also sign into your account to check the status of your application.

- If we cannot confirm your information based on the documentation you submitted, you will receive instructions on how to submit additional documentation.
- If your application is approved, you will receive a message that says you're approved and instructions for how to start receiving your benefit.

## We Are Checking Your Documents

Thank you for submitting your information. Someone is looking at your documents to make sure you qualify.

### This may take some time.

You will receive an email when your documents have been reviewed.

Your status will also be updated in the system when your documents have been reviewed. Please check back later to see if you qualify for the [Affordable Connectivity Benefit](#).

This page will be available to be refreshed until 5/14/2023. If you need to leave and sign back in later, you can see your application status on your home page.

### If you qualify...

You will have 90 days to [find a company](#) and sign up for service.

### If you do not qualify...

We'll ask you for more information or tell you what to do next. You will have until 5/14/2023 (Based on US Eastern Time) to send us the information or complete the next steps.

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Full Legal Name:	<b>Francine Tester</b>
Address:	<b>123 Main Street, TOWN, PA 11111</b>
Application ID:	<b>B11111-AAAAA</b>