



Hopi Telecommunications, Inc

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August 27, 2012

Marlene H. Dortch, Secretary
Federal Communications Commission
Office of the Secretary
445 12th Street, SW
Washington, D.C. 20554

Re: ***Hopi Telecommunications, Inc. Application for the FCC's Broadband Lifeline Adoption Pilot Program, WC Docket No. 11-42***

Dear Ms. Dortch:

Hopi Telecommunications, Inc. (HTI) writes to file supplemental information to its Broadband Adoption Lifeline Pilot Application. Specifically, FCC staff asked for clarification regarding our survey process, how we would randomly assign participants into each of our proposed categories, and our certification procedure.

A detailed explanation of the design, data gathering and evaluation component of the project:

1. HTI is not conducting a field experiment. However, HTI understands that in order for this project to properly evaluate which variables best affect broadband adoption, it must offer different variables to its customers to determine which work best for the Hopi Community and which do not work for the Hopi Community. Our sample size is sufficient as we will target 100% of the subscribers of voice Lifeline who do not currently subscribe to one of our DSL offerings. HTI will hold a community event and informational meeting. HTI will mail, in advance, an invitation to all consumers who might be eligible for the program. On the day of the event, we will carefully explain how the pilot will work, and encourage customers to participate. We will randomly assign participants to one of our four pre-determined groups (details in our original application) by publicly drawing telephone numbers. We will not require customers to be present to participate. After customers are assigned to their groups, they will be offered the choice to sign up for the pilot. At this time, HTI will have participants certify that they are eligible, and will collect ***Subscriber-Provided Information at Enrollment*** as outlined in the appendix of the Public Notice. HTI will not install Broadband to consumers until they have completed the initial survey and completed the certification form.

2. HTI will collect the required data and will not rely on USAC. Our customers are unique and personal guidance may be necessary to ensure complete surveys are submitted. HTI has been extremely successful in its Lifeline outreach efforts. The approach to collect data from our subscribers for this project will be similar to Lifeline recertification efforts. At the conclusion of the Pilot program, we will mail the follow up survey which will include all questions as outlined in the Public Notice appendix ***“Follow-Up and Subscriber-Usage Information”***. We will ensure that customer service representatives are available to assist customers who may need help. If we do not receive follow-up surveys within the time given, our staff will follow up with phone calls, and in some cases, make personal appointments to explain our request. HTI strongly believes that paper surveys will prove to be more reliable than online surveys as these consumers are presumably new to Broadband.
3. HTI does not plan to collect additional data from its subscribers at this time.

Also included on page three of this supplemental filing is our Broadband Pilot participant application/certification.

Please feel free to contact me if you should have any further questions.

Sincerely,

Darlene L. Burden, CPA, CGMA
Hopi Telecommunications, Inc.
(928) 522-8428

cc: Garnet Hanly
Kimberly Scardino
Charles Tyler
Geoffrey Blackwell
Irene Flannery

HOPI TELECOMMUNICATIONS, INC. BROADBAND PILOT APPLICATION

The Hopi Broadband Pilot is a federal program that makes monthly broadband service more affordable for eligible households. Your household may receive a broadband discount on a wireless device OR home service, but not both. Your household may not receive the broadband discount from more than one broadband provider. For the purpose of the Broadband Pilot, a household is an individual or any group of individuals who live together at the same address and share income or expenses. You may not transfer your broadband benefit to another person, even if he or she is eligible. You may lose your broadband benefit and may be prosecuted by the United States government if you violate the one-per-household rule or otherwise make false statements to participate in the Broadband Pilot.

Please complete the form below. You must give proof of eligibility with your application. Send the completed the form and proof of eligibility to: PO Box 125 Keams Canyon, AZ 86034 FAX: 928-738-0097

Applicant Name _____		Email Address _____																	
Phone Number _____	Last 4 digits of SSN _____	Date of Birth _____																	
Residential Address (No PO Box) Street _____ City _____ State _____ Zip Code _____			Permanent Address? Y <input type="checkbox"/> N <input type="checkbox"/>																
Billing Address _____ <i>If applicable</i>																			
<i>Initial here</i>	I give Hopi Telecommunications, Inc. permission to give my name, telephone number, and address to the Universal Service Administrative Company (USAC) or its agent to confirm that my household only receives one Broadband Pilot benefit. If USAC finds that my household receives more than one Broadband Pilot benefit, USAC will notify the providers, and I will have to select one service and I will be de-enrolled from the other.																		
<i>Initial here</i>	I give Hopi Telecommunications, Inc. permission to provide anonymous information about me and my participation in the Broadband Pilot to the Federal Communications Commission. I agree to complete all surveys conducted by HTI related to my participation and give consent for that information to be shared with the FCC.																		
<p>I certify that I, my dependent, or my household receives assistance from at least one of the programs listed below and that I have provided proof of eligibility with my application. <i>(Please check all that apply)</i></p> <p> <input type="checkbox"/> Bureau of Indian Affairs General Assistance <input type="checkbox"/> Federal Public Housing Assistance/Section 8 <input type="checkbox"/> Medicaid <input type="checkbox"/> Head Start (income eligible) <input type="checkbox"/> Food Distribution Program on Indian Reservations <input type="checkbox"/> Low Income Home Energy Assistance Program <input type="checkbox"/> National School Lunch free lunch program <input type="checkbox"/> Supplemental Security Income (SSI) <input type="checkbox"/> Supplemental Nutrition Assistance Program (Food Stamps) <input type="checkbox"/> Temporary Assistance for Needy Families (TANF) <input type="checkbox"/> Tribal TANF </p> <p>Name of eligible person _____ Relationship to applicant _____</p>																			
I OR, I certify that my household income is at or below 135% of the Federal Poverty Guidelines Number of people in your household <input style="width: 50px;" type="text"/>		<table border="1" style="width: 100%; border-collapse: collapse; text-align: center;"> <thead> <tr> <th>Household Size</th> <th>Total Income</th> <th>Household Size</th> <th>Total Income</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>\$15,080</td> <td>3</td> <td>\$25,772</td> </tr> <tr> <td>2</td> <td>\$20,426</td> <td>4</td> <td>\$31,118</td> </tr> <tr> <td colspan="4">Add \$5,346 for each additional person</td> </tr> </tbody> </table>		Household Size	Total Income	Household Size	Total Income	1	\$15,080	3	\$25,772	2	\$20,426	4	\$31,118	Add \$5,346 for each additional person			
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1	\$15,080	3	\$25,772																
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<i>Initial each box</i> I certify, under penalty of perjury, that:																			
<input type="checkbox"/> I live on federally-recognized Tribal lands.																			
<input type="checkbox"/> My household participates in only one Broadband Pilot program, and to the best of my knowledge, no one in my household is currently participating in a Broadband Pilot through another provider.																			
<input type="checkbox"/> I understand that I must notify Hopi Telecommunications, Inc. within 30 days: (1) if I move to a new address; (2) if I, or the eligible person in my household, stops participating in the qualifying program checked above, or if my household income exceeds 135% of the federal poverty guidelines; (3) if my household participates in another Broadband Pilot program; or (4) if my household, for any reason, no longer meets the criteria to participate in the Broadband Pilot. I understand that I may be penalized for failing to make the above notifications.																			
By signing below, I certify under penalty of perjury, that the above information is true to the best of my knowledge. I understand that the Hopi Broadband Pilot is a government program and I may be punished if I knowingly provide false or untrue information to participate in the Broadband Pilot. Punishment may include being fined, imprisoned, or barred from the Broadband Pilot.																			
Signature _____		Date _____																	
<i>Initial here</i>	I understand that I may be required to recertify my Broadband Pilot eligibility every year and that I will lose my Lifeline benefit if I do not recertify each year.																		

For Office Use Only: Documentation reviewed: _____ Reviewed by: _____ Pilot Group: _____
 I Approved Denied, reason _____ Date Approved/Denied _____ Lifeline Household Worksheet? I Yes No
 This form was created in accordance with the FCC's Lifeline rules by John Staurulekis, Inc. * Revised 08.23.2012