



Apache Tribe of Oklahoma
ARP 2022 – 2023 School Clothing Assistance
Kindergarten through 12th Grade



Students must be enrolled members of the Apache Tribe of Oklahoma. Apache Tribe of Oklahoma ARP School Clothing Assistance will assist students (Kindergarten-5th Grade with \$250.00) and (6th Grade – 12th Grade with \$500.00) must be used on School Clothing and backpacks. MUST TURN IN RECEIPT(S) TO PROGRAM. This assistance is open on 7/19/2022, and assistance will close on 9/2/2022. ONLY COMPLETED APPLICATIONS WILL BE ACCEPTED. Assistance is one per student and must be enrolled members of the Apache Tribe of Oklahoma.

Please allow 12 business days to process the application.

PARENT / LEGAL GUARDIAN INFORMATION

THE STUDENT'S LEGAL GUARDIAN WITH WHOM THE STUDENT RESIDES AT THE TIME THIS APPLICATION IS PROCESSED.

FIRST NAME: _____ MIDDLE INTAL: _____ LAST NAME: _____

CURRENT MAILING ADDRESS: _____ IF APARTMENT #: _____

CITY: _____ STATE: _____ ZIP: _____ COUNTY: _____

CUSTODY: LEGAL PARENT: _____ / LEGAL GUARDIAN: _____ / FOSTER PARENT: _____ / CASEWORKER: _____ /

OTHER: _____ / IF YOU HAVE LEGAL CUSTODY AGREEMENT, PLEASE TURN IN PAPERWORK WITH APPLICATION.

CURRENT PHONE: _____ EMAIL ADDRESS: _____

PLEASE UNDERSTAND IF WE HAVE ANY QUESTIONS ABOUT YOUR APPLICATION, WE WILL CONTACT YOU BY PHONE OR EMAIL.

IT IS YOUR RESPONSIBILITY TO CONTACT THE OFFICE SHOULD YOU MOVE DURING THE PROCESS OF THE APPLICATION.

PLEASE MAKE SURE THE ADDRESS IS CURRENT WITH ENROLLMENT.

STUDENT INFORMATION

FOR MEMBERSHIP TO BE VERIFIED, ALL FIELDS MUST BE COMPLETE, CORRECT, AND LEGIBLE.

FIRST NAME: _____ MIDDLE INTAL: _____ LAST NAME: _____

TRIBAL ENROLLMENT NUMBER: _____

DATE OF BIRTH: _____ AGE: _____

GRADE FOR 2022/2023 SCHOOL YEAR: _____ SCHOOL TYPE: Public _____ / Home School _____

PUBLIC SCHOOL

SCHOOL'S NAME: _____

SCHOOL'S ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____ COUNTY: _____

PUBLIC SCHOOL DOCUMENT:

- LETTER OF VERIFICATION OF ENROLLMENT FOR SCHOOL
 - LETTER OF VERIFICATION OF ENROLLMENT FOR SCHOOL: MUST HAVE PARENT/GUARDIAN NAME / STUDENT NAME AND GRADE FOR THE SCHOOL YEAR 2022-2023 / PRINT NAME AND SIGNATURE OF SCHOOL OFFICIAL FILLING OUT THE LETTER AND MUST BE ON SCHOOL'S LETTERHEAD.
- ONE LETTER FOR ONE APPLICATION.

HOME SCHOOL

I, THE UNDERSIGNED, HEREBY ATTEST, THAT MY CHILD (NAME OF CHILD _____) ARE HOMESCHOOLED AT THE HOME OF (NAME OF PERSON HOME _____), AND THE LOCATED AT (ADDRESS/CITY/STATE/ZIP TO HOME: _____).
_____).

HOME SCHOOL DOCUMENTS:

- Copy of the School Year Curriculum or Original Textbook Receipts.

Parents/Legal guardian acknowledges that the funds distributed through the Apache Tribe of Oklahoma ARP 2022 School Clothing Assistance are solely to purchase school clothing for the child on this application. I, the parents/legal guardian, did read the Guidelines and agreed to follow the guidelines that are set for Apache Tribe of Oklahoma ARP 2022-2023 School Clothing Assistance. The Parents/Legal guardian understands that if the gift card is lost or stolen, the Apache Tribe of Oklahoma will not replace it. The Parent/Legal Guardian is responsible for taking care of the gift card and using it for its intended purpose. If necessary, I give the Apache Tribe of Oklahoma ARP 2022 School Clothing Assistance permission to verify my child's tribal enrollment. Apache Tribe of Oklahoma ARP 2022 School Clothing Assistance has permission to request any other documents needed to complete the application or to verify the custody of the child.

Notice Regarding False Statements:

Whoever, in any matter within the jurisdiction of any department or agency of the United States, knowingly and willfully falsifies, conceals, or covers up by any trick, scheme, or device a material fact or makes any false, fictitious, or fraudulent statements or representations, or makes or uses any false writing or document knowing the same to contain any false, fictitious or fraudulent statement or entry, may be punished by fine, imprisonment, or both. (903. FALSE STATEMENTS, CONCEALMENT—18 U.S.C. § 1001)

I have read and understand the preceding Rights and Responsibilities, Notice Reading False Statement, and the program guidelines. I understand that all receipt(s) must be returned to the Apache Tribe of Oklahoma ARP or Supportive Services within 90 calendar days of the date of receiving the assistance (mailing out date or pick up date). I verify that I am a legal parent/legal guardian for the minor listed above and spend the funds on behalf of the above-named tribally enrolled student by the legal parent/legal guardian.

Print Child Full Name: _____

Print Legal Parent/Legal Guardian Full Name: _____

Signature: _____ **Date:** _____