

Kickapoo Tribe of Oklahoma

Social Services Department

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TRIBAL GENERAL ASSISTANCE APPLICATION

Kickapoo Tribe of Oklahoma tribal members may apply for assistance **up to three (3) times a fiscal year**, only once during a quarter to assist with rent/utilities.

The “fiscal” year is divided into four quarters.

First Quarter	Second Quarter	Third Quarter	Fourth Quarter
October	January	April	July
November	February	May	(August)
December	March	June	(September)

Tribal General Assistance may be applied **for three (3) times a fiscal year**, but only once during a quarter. The program opens on the first business day of October and closes on the last business day of July.

The following are the requirements for each applicant group:

- **KTO ELDERS (60 YEARS OF AGE AND OLDER)** will be eligible to receive \$600.00 up to three (3) times a fiscal year (October – July). Elders will need to show the need for assistance and may apply once every four (4) months, not to exceed \$1,800.00. Payments can be paid directly to the individual and/or vendors.
Required documents include:
 - ☐ **COMPLETED Application** - If you have a PO Box, you must provide a physical address or directions to your home.
 - ☐ **Current Tribal enrollment (CDIB) card** – copy of the front and back
- **KTO ELDERS (50 – 59 YEARS OF AGE)** will be eligible to receive \$500.00 up to three (3) times a fiscal year (October – July) **per household**. Applicant will need to show the need for assistance to be paid and may apply once every four (4) months, not to exceed \$1,500.00. Payments can be paid directly to the individual and/or vendors. **ONLY one per household. NO dual households will be accepted.**
Required documents include:
 - ☐ **COMPLETED Application** - If you have a PO Box, you must provide a physical address or directions to your home.
 - ☐ **Current Tribal enrollment (CDIB) card** – copy of the front and back

- **DISABILITY/SSI** recipients are eligible to receive the amount in their qualified age bracket up to three (3) times a fiscal year (October – July). Applicant will need to show the need for assistance, and may apply once every (4) months.

Required documents include:

- ☐ **COMPLETED Application**
- ☐ **Current Tribal enrollment (CDIB) card** – copy of the front and back
- ☐ **Copy of most recent SSI Benefits letter**

- **GUARDIANS OR CUSTODIANS OF KTO ADULT WARDS IN STATE OR TRIBAL COURT CUSTODY** will be eligible to apply for tribal assistance based on the needs of the adult. However, all payments will be made to vendors on behalf of the adult ward. If the elder or disabled person maintains his/her own household, then the designated vendors for rent and/or utilities will be paid up to the amount they are eligible for three (3) times a fiscal year. Guardianship papers from the appropriate court must accompany the application.

Required documents include:

- ☐ **COMPLETED Application**
- ☐ **Current Tribal enrollment (CDIB) card** – copy of the front and back
- ☐ **Guardians or Custodians of KTO Adult wards in State or Tribal Court custody must have copies of court documents.**

*** Tribal members shall be responsible for reporting any assistance that may be considered income to the Social Security office, if they are receiving Supplemental Security Income (SSI). They must also report to the Department of Human Services if they are receiving any form of welfare assistance, and to the Internal Revenue Service for tax purposes. If you sign a consent to release this information to any of these agencies, the Social Services Office will reply to a request to verify the payments you received. If you elect to pay a vendor directly for any living assistance costs, then the agencies above may be able to exempt the tribal assistance received.

- **KTO FAMILIES WITH CHILDREN (18 TO 49 YEARS OF AGE)** who maintain their own households and show the need for assistance will be eligible to receive \$400.00 up to three (3) times a fiscal year (October – July). Applicants may apply once every four (4) months, not to exceed \$1,200.00. Payments will only be made towards rent and/or utilities (electric, water, gas). Accounts will be paid according to the amount on the bill, up to \$400.00, and no credits will be applied.

If both parents in the household are KTO enrolled, both must sign the application. If only one parent is KTO, then that parent must be the applicant and sign the application.

Required documents include:

- ☐ **COMPLETED Application** - ALL household members must be listed, and any vendor(s) you want paid. If you have a PO Box, you must provide a physical address or directions to your home.
- ☐ **Current Tribal enrollment (CDIB) card** – copies of the front and back for ALL household members.
- ☐ **Child verification** – birth certificates, DHS information verifying household, or school enrollment showing guardianship.
If parents are separated or divorced, the applicant must verify by court document they have custody of the child/children. For children who are 18 years of age, you must provide verification that they are enrolled and still attending high school.
- ❖ **Verification showing that you are the head of household. ALL current utility bills are required**, even if you do not want them to be paid.
 - ☐ **Rental/Lease agreement / Mortgage statement**
 - ☐ **W-9 Form (if you wish to have your rent paid)**
 - ☐ **Electric bill**
 - ☐ **Water bill**
 - ☐ **Gas bill**

- **KTO SINGLE/MARRIED ADULTS WITH NO DEPENDENTS (18 – 49 YEARS OF AGE)** who maintain their own households and show the need for assistance will be eligible to receive \$200.00 up to three (3) times a fiscal year (October – July). The applicant must be an enrolled KTO member. Applicants may apply once every four (4) months, not to exceed \$600.00. Payments will be only be made towards rent and/or utilities (electric, water, gas). Accounts will be paid according to the amount on the bill, up to \$200.00, and no credits will be applied.

Required documents include:

- ☐ **COMPLETED Application** - ALL household members must be listed, and any vendor(s) you want paid. If you have a PO Box, you must provide a physical address or directions to your home.
- ☐ **Current Tribal enrollment (CDIB) card** – copies of the front and back for ALL household members.
- ❖ **Verification showing that you are the head of household. ALL current utility bills are required**, even if you do not want them to be paid.
 - ☐ **Rental/Lease agreement / Mortgage statement**
 - ☐ **W-9 Form (if you wish to have your rent paid)**
 - ☐ **Electric bill**
 - ☐ **Water bill**
 - ☐ **Gas bill**

- **HEAD(S) OF HOUSEHOLD WHO ARE NON-KTO MEMBERS BUT HAVE CUSTODY OF KTO MINOR(S) 18 YEARS & YOUNGER** may apply. The applicant must show the need of assistance, and is limited to \$50.00 per KTO enrolled child (with the maximum amount of \$200.00), up to three (3) times a fiscal year (October – July). Applicants may apply once every four (4) months. Payments will only be made towards rent and/or utilities (electric, water, gas). The applicant is required to provide proof of custody by submitting court documents, DHS case records showing household compositions, or school enrollment showing guardianship.

Required documents include:

- ☐ **COMPLETED Application** - ALL household members must be listed, and any vendor(s) you want paid. If you have a PO Box, you must provide a physical address or directions to your home.
- ☐ **Current Tribal enrollment (CDIB) card** – copies of the front and back for ALL household members.
- ☐ **Child verification** – birth certificates, DHS information verifying household, or school enrollment showing guardianship.
If parents are separated or divorced, the applicant must verify by court document they have custody of the child/children. For children who are 18 years of age, you must provide verification that they are enrolled and still attending high school.
- ❖ **Verification showing that you are the head of household. ALL current utility bills are required**, even if you do not want them to be paid.
 - ☐ **Rental/Lease agreement / Mortgage statement**
 - ☐ **W-9 Form (if you wish to have your rent paid)**
 - ☐ **Electric bill**
 - ☐ **Water bill**
 - ☐ **Gas bill**

***** KTO Families, Single/Married heads of households living with other households will NOT be eligible to apply for Tribal General Assistance, until they can verify they have set up their own residence and are the primary head of household.

It is your responsibility to turn in ALL required documents every time you apply to complete your application. All utility bills are required, even if you do not want them to be paid. Incomplete applications will NOT be processed.

You may submit your application in person at our office, by mail, or fax. We are not responsible for your application not coming through the fax during our busy hours.

Assistance is strictly based on need and is NOT an entitlement.

The processing time for applications can take 3 – 4 weeks, especially if you apply during the first month of every quarter (as this is our busiest time).

PLEDGES MAY ONLY BE REQUESTED FOR CUT-OFF NOTICES ON UTILITIES. WE WILL NOT BE MAKING ANY PLEDGES TOWARDS RENT. YOU ARE RESPONSIBLE FOR MAKING YOUR OWN PAYMENT ARRANGEMENTS. WE ARE NOT RESPONSIBLE FOR ANY CUT-OFFS OR EVICTIONS.

Approved: September 27, 2016 – Business Committee Meeting

Application for Tribal Assistance

(Incomplete applications will be rejected)

Applicant Name (First, Last)	DOB	AGE	CDIB#
Co-Applicant Name (First, Last)	DOB	AGE	CDIB#
Mailing Address	City	State	Zip
Finding Address	City	State	Zip
Telephone #	Message #		

Must list ALL persons in your household:

NAME	AGE	DOB	ROLL#	RELATION

I, therefore am granting the Social Services Department limited authority to verify my needs including the consent to vendors that I have listed. _____

If you are needing a pledge made on your utilities, please list social security number: _____

LIST NEED OF ASSISTANCE:

Vendor

(Example: OG&E, ONG, CVEC, etc)

Amount

_____	_____
_____	_____
_____	_____

I have been informed that any person knowingly, willfully and fraudulently provides false information for the purpose of obtaining benefits which he/she is ineligible to receive, may be subject to prosecution to the fullest extent by the Kickapoo Tribe of Oklahoma.

I have read or had explained to me and understand/agree with the policies, procedures and requirements that govern the Tribal Living Assistance program.

Signature of Applicant

Date

Signature of Co-Applicant

Date

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

Print or type
See Specific Instructions on page 2.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification; check only one of the following seven boxes: <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) ▶ _____ Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner. <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) _____ Exemption from FATCA reporting code (if any) _____ <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
6 City, state, and ZIP code	
7 List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the instructions for line 1 and the chart on page 4 for guidelines on whose number to enter.

Social security number	
or	
Employer identification number	

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions on page 3.

Sign
Here

Signature of
U.S. person ▶

Date ▶

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)

- Form 1099-C (canceled debt)

- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See *What is backup withholding?* on page 2.

By signing the filled-out form, you:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.