



Wyandotte Nation
64790 East Highway 60
Wyandotte OK 74370-2098
Phone: (918) 678-3268 – FAX: (918) 678-3087
wyandotte-nation.org



P.L. 102-477 Services Program ~ Application for Assistance

Name: _____
(Last) (First) (M.I.)

Address: _____

(City) (State) (Zip) (County)

Email: _____

Phone Number: _____
(Home) (Cell)

Tribal Affiliation: _____

CDIB Number *or*
Proof of Tribal Affiliation: _____

Date of Birth: _____
(Month) (Day) (Year)

Gender: ☐ Male ☐ Female Selective Service: ☐ Yes ☐ No

Veteran: ☐ Yes ☐ No Employed: ☐ Yes ☐ No

Hours Employed: _____ per week Salary/Wage: \$ _____ per hour

Education Level: ☐ Dropout ☐ High School/Diploma/GED
☐ Student ☐ Post High School

Have you received Cash Assistance in the last 6 months? (BIA, TANF, DHHS) ☐ Yes ☐ No

Need: ☐ Job ☐ School Supplies ☐ GED
☐ Childcare ☐ Tuition Assistance ☐ Vocational Training
☐ ACT Prep ☐ Resume Building ☐ Work Clothes/Supplies
☐ Other _____

Client Signature: _____
(Date)

OFFICE USE ONLY	
Intake Signature: _____	Date: _____
Referred Caseworker: _____	Date: _____