



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:

(provide proof of residency)

(City)

(State)

(Zip)

(County)

Email:

Phone Number:

(Home)

(Cell)

Tribal Affiliation:

**CDIB Number *or*
 Proof of Tribal Affiliation:**

(provide CDIB or proof of 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 experienced any of the following in the last 6 months?

Loss of job Homelessness Victim of a crime Cash Assistance (BIA, TANF, DHHS, etc)

Please select services requested:

Childcare Housing Counseling
 Tuition Assistance Utility Assistance Supervised Visitation
 Vocational Training Advocacy Services Child Welfare Services
 Work Clothes/Supplies Services Due to Victimization Legal Assistance
 School Supplies Other: _____

Client Signature: _____

Date: _____

OFFICE USE ONLY

Intake Signature: _____ **Date:** _____

Referred Caseworker: _____ **Date:** _____