

SOCIAL SERVICES DEPARTMENT

PO BOX 825~ANADARKO OK~73005~PHONE (405)247-2448~FAX(405)247-5942

Tribal Assistance Program

The Tribal Assistance Program application period begins October 1st and ends September 30th. This program operates on a first come first serve basis depending on availability of funds. All checks for utilities, glasses, hearing aids and dentures are made to the vendor. **NO REIMBURSEMENTS** will be made for purchases made prior to this application.

ASSISTANCE The following benefits are for all tribal citizens. Must be 18 or older to receive utility assistance and the **bill must be in tribal citizen's name.**

- **Clothing \$75**

Purchases are limited to clothing only. Items that may be purchased include: dresses, shirts, shoes, boots, blouses, pants, shorts, capris, undergarments, school uniforms, jackets, coats, winter gloves, backpacks and belts.

- **Food \$75**

Unapproved grocery purchases include: makeup, jewelry, perfume, hair products, tobacco and alcohol products

- **Utilities \$150**

Must attach utility bill. All cut off notices for utilities will take 7-10 business days before a check will be issued to utility vendor.

HEALTH

- Glasses: **\$200** for tribal citizens (0-59)

ELDER HEALTH ASSISTANCE All applicants must be 60 years old or more for the following benefits:

- **Glasses: \$500** every year
- **Dentures: \$3,000** every 5 years
- **Hearing Aids: \$3,000** every 5 years

PLEASE REQUEST ELDER APPLICATION

REQUIREMENTS

- All applications must have a bill or invoice if you apply for UTILITIES, DENTURES OR GLASSES. If not your application will be placed on **pending** status.
- Minors (under 18) **cannot** apply for utilities
- Our office cannot rush checks for utility cut off notices

SERVICES AREA

Nationwide

For more information contact Heather Cozad, Social Services Director (hcozad@delawarenation.com)

Social Service Form 001_Revised September 2017

Tribal Assistance Program
P.O. Box 825
Anadarko, OK 73005



Toll Free 1-800-203-2121
Phone (405)247-2448
Fax (405)247-5942

PLEASE PRINT

Name _____ Enrollment# _____ Male Female
Address _____ City _____ State _____ Zip _____
Birth date _____ Age _____ Social Security # _____ Phone _____

PLEASE READ CAREFULLY: Minors (under 18) cannot apply for utilities. All cut off notices for utilities will take 7-10 business days before a check will be issued to utility vendor. **NO REIMBURSEMENTS WILL BE MADE FOR PURCHASES PRIOR TO THIS APPLICATION. All checks must be made out to a vendor.**

CHOOSE ONE ITEM BELOW

- GLASSES (**\$200**) An invoice must be attached with application
- FOOD (**\$75**) **RECEIPTS MUST BE SUBMITTED AFTER PURCHASE**
- CLOTHING (**\$75**) **RECEIPTS MUST BE SUBMITTED AFTER PURCHASE**
- UTILITIES (**\$150**) A utility bill must be attached with application

I certify that the enclosed information is true to the best of my knowledge. In regards to a minor child: I understand that if requested by the Delaware Nation Social Services to submit supportive documentation stating proof of legal custody of said minor child, it will be furnished and that if supportive documents are not submitted then I will not be eligible for this program. It is further understood that this is not an entitlement program. I also understand that receipts will be submitted for clothing and food assistance.

PRINT NAME (Parent/Legal Guardian)

Signature (Parent/Legal Guardian)

Social Services Department

Date

Date

OFFICE USE ONLY	
Approved _____	Denied _____
Amount _____	\$ _____