

# Caddo Nation Education Department

# **Education Assistance ARPA**

P.O. Box 487 - Binger, OK 73009 (405) 656-2344, Ext. 9855 Email: education@mycaddonation.com

#### Caddo Nation Education Assistance Grades 1-12 Guidelines

## PLEASE NOTE: REQUESTS FOR REIMBURSEMENT WILL NOT BE ACCEPTED

#### **Purpose**

The funds allotted to the Caddo Nation Education Department shall be used to 1) encourage students to finish their schooling, and 2) financially assist tribal members attending public schools, including home-schooled students with certain school-related expenses and fees.

#### **Eligible Activities**

The following is a list of activities and/or expenditures that may be deemed allowable. Applicants should note that if this financial assistance has already been provided through any of the existing tribal programs, scholarships, or other sources, the application will not be considered for funding.

- Special services such as tutoring and other academic activities
- Special books or supplies
- Graduation announcements
- Cap & gown
- Senior pictures
- Class rings

- Fees for school-related functions
- Assist with class trips
- Award trips
- ACT/SAT Testing fee and one retake
- Driver's Education
- Uniforms, (only if required by school)

#### **Ineligible Activities**

The following is a list of activities and/or expenditures that will not be allowed.

• Reimbursement requests for payments already made by the applicant or a responsible party

• Other expenses related to education to be determined by the Caddo Nation Education Program.

- Services duplicated by Johnson O'Malley or other Indian Education Programs
- Any types of camps (i.e. cheer camp, band camp, sports camp, etc.)
- Purchase of school pride clothing items (i.e. hats, shirts, coats, etc.)
- The Caddo Nation Education Department does not provide clothing vouchers.

### Participant Checklist:

- Completed & Signed Application
- Copy of Caddo Nation Enrollment card for student
- Documentation verifying enrollment in an academic institution or a recipient of home-school instruction.
- Any invoices, statements, etc., showing a balance and the company/vendor information
- W-9 Form must be completed by the company/vendor and turned in before any funding will be released.

Failure on the part of the applicant to provide the required information will preclude the applicant from eligibility in obtaining assistance under this program. It is your responsibility to make sure that all documentation for your application is complete. *Incomplete applications will not be accepted.* 

## **Education Assistance Grades 1-12 Application** Applicant Information: Name: \_\_\_\_\_ Home Address: Street No./ Route/PO Box City SSN: DOB: Caddo Membership No: Student's Grade: Home Phone No. Cell Phone No. E-mail Requesting assistance for: □Cap & Gown □Concurrent Enrollment (college credit) ☐Graduation Announcements □ACT or SAT Testing fee □ Pictures □Class Ring Other, please explain: Amount Requested: \$ Company/Vendor: Address City State Current School: Name Address City State Has the school moved to virtual instruction or have you, the parent/guardian chosen to move the student to virtual instruction due to the COVID-19 crisis? □Yes □No Has anyone in the household tested positive for the COVID-19 virus? □Yes $\square$ No Has anyone in the household been or is currently in quarantine? □Yes □No Do you expect any additional expenditures over the remainder of the academic year? □Yes $\square$ No If yes, please check all that apply: ☐Health related □Rent □Internet □Other • I agree to abide by all the Caddo Nation Education Department rules, regulations and policies. • I give consent to the Caddo Nation Education Department staff to use the above information, and any documentation submitted with this application, to determine whether or not I am eligible for financial assistance according to the guidelines. • I understand that the maximum amount for Education Assistance is limited per academic year (August 01 through July 31) to: • Grades 9 - 12 \$500.00 • Grades 5 - 8 \$300.00 • Grades 1 - 4 \$150.00 • I also understand that any such payments will be made to the service provider/company/vendor. • I understand that persons submitting or causing to be submitted any false information in connection with any application, report, or other document, upon which the provision of Federal financial assistance or any other payment of Federal funds is based, may be subject to criminal prosecution under provisions such as sections 287, 371, or 1001 of title 18, U.S. Code. I UNDERSTAND THE CONTENTS OF THIS AGREEMENT AND ACCEPT ALL OF THE ABOVE CONDITIONS. I declare the information given by me on this form is true, correct and complete to the best of my knowledge.

Student Signature (Parent/Guardian sign if student is under the age of 18 years)



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# VERIFICATION OF ENROLLMENT

Dear School Official: This form, complete with your original signature, is required for the Caddo Nation Education Assistance Grades 1-12 application. This form can be mailed, scanned and emailed, or hand-delivered to the Caddo Nation Education Department at the information listed above, at your earliest convenience.

AUTHORIZATION FOR RELEASE OF INFORMATION: By signing this document, I authorize the

release of this information to the Cadd	lo Nation Education I	Departmen	t.			
Parent/Guardian signature	Student's Printed Name		Cadd	Caddo Membership Number		
BELO	W THIS LINE FOR SCHOOL	OFFICIAL ON	LY			
The above named student is currently	enrolled at					
in the grade, for the academic year of 20 20 as a full-time student in good stand-						
ing. (If the student is a senior, He/She be graduating on, upon completion of all re-						
quired courses.His/Her current cumulative GPA is currently)						
Name of School	Address	Ci	y State	Zip		
I certify the information provided above is accurate according to our admission records.						
Signature of School Official			Please place			
Printed name for above signature			school stamp or here	<b>I</b>		
Date						



## **Request for Taxpayer Identification Number and Certification**

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

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

	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						
page 3.	3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Che following seven boxes.	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):					
e. ins or	Individual/sole proprietor or C Corporation S Corporation Partnership single-member LLC	☐ Trust/estate	Exempt payee code (if any)				
t de la compa	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partners						
Print or type. Specific Instructions on page	Note: Check the appropriate box in the line above for the tax classification of the single-member ow LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the or another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single is disregarded from the owner should check the appropriate box for the tax classification of its owner.	Exemption from FATCA reporting code (if any)					
cifi	Other (see instructions)	(Applies to accounts maintained outside the U.S.)					
Spe			nd address (optional)				
See							
	6 City, state, and ZIP code						
	7 List account number(s) here (optional)						
Par	t I Taxpayer Identification Number (TIN)						
	your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avo	oid Social sec	urity number				
backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see <i>How to get a</i>			] - [ ] - [ ]				
TIN, la	ater.	or					
Treter in the deceant le in more than one hame, eee the met detiene le inite 1.7 tied eee 777 at 7 and and		nd Employer	identification number				
Numb	per To Give the Requester for guidelines on whose number to enter.		-				
Par	t II Certification						
Unde	r penalties of perjury, I certify that:						
2. I ar Ser	e number shown on this form is my correct taxpayer identification number (or I am waiting for a n not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) rvice (IRS) that I am subject to backup withholding as a result of a failure to report all interest o longer subject to backup withholding; and	I have not been no	otified by the Internal Revenue				
3. I ar	m a U.S. citizen or other U.S. person (defined below); and						
4 The	PATCA code(s) entered on this form (if any) indicating that I am exempt from EATCA reporting	n is correct					

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,

Sign Here	Signature of	Date ▶	
		re not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, late	
acquisition	ı or abandonment of secu	property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, paymen	nts

## **General Instructions**

Section references are to the Internal Revenue Code unless otherwise

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

### **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 taxpaver 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,