



Caddo Nation of Oklahoma

P.O. Box 487 | Binger, OK 73009

CRISIS ASSISTANCE DOCUMENT LIST

APPLICANT MUST BE AN ENROLLED MEMBER OF THE CADDO NATION, 18 YEARS OF AGE, AND HEAD OF HOUSEHOLD.

The following documents are needed to complete your assistance application:

1. Certificate Degree of Indian Blood (CDIB) for ALL Native household members
2. Social Security Number(s) for ALL household members
3. Picture I.D. (Driver's License, State I.D., etc.)
4. Employment verification for ALL employed in household AN D/OR
If any adult household members receive any type of income (Child Support, TANF, SSI, Social Security, Section 8, Royalties-TPIS's (if they exceed \$2,000), Workers Comp, Veteran's Benefits)
5. Any adult in the household with no income must submit one of the following:
 - a. Unemployment affidavit
 - b. Layoff letter from previous employer
 - c. Letter from unrelated third part verifying unemployment
6. Self-employment affidavit is to be signed by any person in the household who is self-employed
7. Crisis statement if applying for Crisis Assistance

TYPE OF ASSISTANCE REQUESTED:

Crisis Assistance

Motor fuel

LIHEAP Crisis

Title IV

Original Utility Bill (Cut-Off Notice), Quote, Invoice, or Eviction Notice

Other (Describe):

By Signing Below:

- I understand that I must have all required documents in my case file before my application will begin the review process.
- I understand I have a period of 2 weeks from date of application to submit all necessary documentation or my case will be closed.
- I further understand that my application will be thoroughly reviewed, and any false information found could result in no assistance for one (1) year.

Applicant Signature: _____ Date: _____



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CRISIS ASSISTANCE APPLICATION

Date		County		Roll #			
Last Name		First Name		Middle Initial		SSN	
Address		City		State		Zip	
Home Phone				Cell Phone			

LIST ALL HOUSEHOLD MEMBERS (INCLUDING YOURSELF)

NAME	DOB	TRIBE	EMPLOYED?	DISABILITY
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	
			Y N	

Which of the following do you need assistance with? Rent Deposit Other (*please explain below*)

If you are needing assistance with rent or a deposit, please provide the following information:

Landlord Name		Phone	
Address			

Employer	Address	Monthly Income

Other Income Received	Amount & How Often	
TANF	Y	N
SSI	Y	N
Social Security	Y	N
Veteran's Benefits	Y	N
Worker's Compensation	Y	N
Unemployment Benefits	Y	N
Child Support	Y	N
Royalties, TPI, Etc.	Y	N

Have you or any other member of your household received LIHEAP or Crisis Assistance from any other sources?	Y	N
If yes, when and from what source (name, address, & phone #):		
Are you receiving any assistance from any other program from the Caddo Nation or Caddo Housing Authority?	Y	N
If yes, from what program:		

Applicant Signature: _____ Date: _____

OFFICE USE ONLY			
	Approved	Denied	
Comments	_____		
Council Approved? <i>(if needed)</i>	Approved	Denied	Amount Approved \$ _____
Coordinator Signature:	_____		Date: _____