

School Year: August 2022- May 2023
School Supply Reimbursement
4K-12th Grade Students
June 1- Sept 30
DUE: Sept. 30, 2022 by 5:00 PM
Deposits will be issued once a month ONLY.
Please get your paperwork in ASAP!

<u>FOR OFFICE USE ONLY</u>	
<input type="checkbox"/>	Bank Form on File
<input type="checkbox"/>	Proof of School Enrollment
<input type="checkbox"/>	Tribal Membership on file
<input type="checkbox"/>	Sent to Accounting Date: _____
<input type="checkbox"/>	Entered into database

Student Information		
Student's Full Name:		
Please indicate child's Tribal Affiliation:	<input type="checkbox"/> Tribal Member Roll #: _____	<input type="checkbox"/> First Generation (Letter must be submitted)
Name of school attending in the upcoming school year:		
Date of Birth:	Age:	Grade ENTERING :
Did the child participate in the school supply program last year? YES <input type="checkbox"/> NO <input type="checkbox"/>		

Guardian Information		
<u>Tribal Member</u> Parent Name:	Tribal Member Parent Roll #:	
<u>Primary</u> Custodial Parent:	Date:	
Mailing Address:		
City:	State:	Zip Code:
Phone:	Email:	
Direct Deposits will be issued to the account listed on the Education Department Direct Deposit Form!		

The Student Services Program objective is to help provide the basic school needs of enrolled Tribal Member children and First Generation Indian Descent students from 4K (4 years old) thru 12th grade. Child must be four years old by September 1, 2022. This program will operate June 1st –September 30, 2022. All applications and supporting documents must be submitted by 5:00 pm on September 30, 2022 or postmarked by September 30, 2022. **A \$300.00 direct deposit will be issued into the bank account listed on the Education Department Direct Deposit Form for the purchase of school clothing, school supplies and/or school fees.** To participate in the computer reimbursement portion of this program you must also complete page 2 and submit or postmark the original computer receipt and page 2 by 5:00 pm on September 30, 2022.

The following must be submitted with each application:

- Must submit one application per child
- Proof of school enrollment (child must be in 4K-12th grade)
- Indian Descent Letter if applicable (You do not have to submit a new copy every year)
This letter can be obtained by contacting the Tribal Enrollment Office at (251) 368-9136 ext. 2281.
- If applicable submit legal documents stating custody/guardianship of student

If there may be a custody dispute regarding payment of this benefit, it is in your best interest to submit a child custody court order as supporting documentation. If no custody information is submitted, the benefit will be given to the parent signing the application. Award of benefit decisions will be made based on the information submitted and available at the time the application is processed. Failure to provide supporting documents will result in application being delayed, returned or unprocessed.

I certify that I am the primary legal guardian of the child listed on this application, and that I have the legal right to apply for and receive this benefit. If I sign for and receive this benefit fraudulently, I understand that I will be prosecuted by the Poarch Band of Creek Indians.

Signature of Primary Legal Guardian of child listed on application	Date
Page 1	



School Year: August 2022- May 2023
 School Supply Reimbursement Program
COMPUTER REIMBURSEMENT ONLY

4K-12th Grade Students
 June 1, 2022- Sept. 30, 2022
 DUE: Sept. 30, 2022 by 5:00 PM

Deposits will be issued once a month ONLY. Please get your paperwork in ASAP!

Guardian Information		
Tribal Member Parent Name:		Tribal Member Parent Roll #:
Primary Custodial Parent:		Date:
Mailing Address:		
City:	State:	Zip Code:
Phone:	Email:	
Have you received a computer reimbursement in the past 4 years? <input type="checkbox"/> YES <input type="checkbox"/> NO		

Household Student Information	
Please list all TRIBAL children who are in PreK-12 th Grade that live in your household:	
1. Name: _____	Date of Birth: _____
2. Name: _____	Date of Birth: _____
3. Name: _____	Date of Birth: _____
4. Name: _____	Date of Birth: _____
5. Name: _____	Date of Birth: _____
6. Name: _____	Date of Birth: _____

The computer reimbursement program objective is to help provide a computer device for every household that has a Tribal Member student or First Generation student from 4K (4 years old) thru 12th grade every 4 years. This program is part of the student support program that operates June 1st through September 30th. **The original computer receipt, this form (page 2), and the Education Department Direct Deposit Form must be submitted or postmarked by 5:00 pm on September 30, 2022.** Computer reimbursement is up to \$600.00 and will be directly deposited into your banking account within 45 days.

If there may be a custody dispute regarding payment of this benefit, it is in your best interest to submit a child custody court order as supporting documentation. If no custody information is submitted, the benefit will be given to the parent signing the application. Award of benefit decisions will be made based on the information submitted and available at the time the application is processed. Failure to provide supporting documents will result in application being delayed, returned or unprocessed.

I certify that I am the primary legal guardian of the child listed on this application, and that I have the legal right to apply for and receive this benefit. If I sign for and receive this benefit fraudulently, I understand that I will be prosecuted by the Poarch Band of Creek Indians.

 Signature of Primary Legal Guardian of child listed on application _____
Date



Education Department Direct Deposit Form

ONLY SUBMIT IF YOU DO NOT HAVE A FORM ON FILE FOR EDUCATION REIMBURSEMENTS

Name of Account Holder: _____

Tribal Member **Parent** Name: _____ Tribal Roll Number: _____

Direct Deposit Agreement Form

Authorization Agreement

I hereby authorize **Poarch Band of Creek Indians** to initiate automatic deposits to my account at the financial institution named below. I also authorize **Poarch Band of Creek Indians** to make withdrawals from this account in the event that a credit entry is made in error.

Further, I agree not to hold **Poarch Band of Creek Indians** responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution in depositing funds to my account.

This agreement will remain in effect until **Poarch Band of Creek Indians** receives a written notice of cancellation from me or my financial institution, or until I submit a new direct deposit form to the Tribal Member Benefits Department.

Account Information

Name of Financial Institution: _____

Address of Financial Institution: _____

Routing Number: _____

Account Number: _____

Money Market
Checking Savings

Notarized Signature

Authorized Signature (Primary): _____ Date: _____

Authorized Signature (Joint): _____ Date: _____

Signed before me on this _____ day of _____, _____.

Notary

My Commission Expires _____

PLEASE ATTACH VOIDED CHECK!