



**DELAWARE TRIBE EDUCATION ASSISTANCE**  
**For students in 6<sup>TH</sup> thru 12<sup>th</sup> grade**

**Eligibility Requirements:**

- **Must be a registered member** of the Delaware Tribe of Indians. \*A copy of the applicants Tribal Registration Card and number **MUST BE SUBMITTED WITH APPLICATION.** (If card is not available, a replacement may be obtained for the Delaware Tribe Registration Department).
- This Assistance is to assist students with items required for classes, but not provided by the school (such as school supplies, graduation expenses, ACT exams, summer school if required, band, choir, etc.). Students may be reimbursed up to \$50.00 per application.
- One application per student per fiscal year may be funded.
- The application will be reviewed at the next regularly scheduled monthly Education Committee meeting.
- Applications are approved on a case-by-case basis.
- Awards are based on the availability of funds.

**Directions:**

1. Obtain application from Tribal Headquarters, by phone call or delawaretribe.org.
2. Complete application and return with a copy of your Delaware Registration Card and receipt of purchase displaying clearly where purchase was made, to the attention of the Education Department to the address listed above.
3. A separate application must be submitted for each eligible child in the family.
4. Applicants will be notified by email or phone call if assistance is approved.

Name: \_\_\_\_\_  
                     Last  First  MI.  (Maiden)

Address: \_\_\_\_\_  
                                     Street  City  State  Zip

Telephone: (\_\_\_\_\_) \_\_\_\_\_ *Email Address (please print legibly)* \_\_\_\_\_

Delaware Tribal Registration Number: \_\_\_\_\_

Date of Birth: \_\_\_\_\_ Age: \_\_\_\_\_ Male: \_\_\_\_\_ Female: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

I hereby certify that the above information is true and correct to the best of my knowledge. Any funds received under false pretenses will be repaid to the education account within 30 days.

---

*Signature of Applicant (or to whom check should be issued)* \_\_\_\_\_ *Date* \_\_\_\_\_

- **ANY** applicant purposely attempting to defraud the Education Committee will not be eligible for any Education Programs for a period of one (1) year.
- Registered Delaware Tribal member as defined in the Trust Document, Article 1-membership. Trust Board Education ordinances, Purpose 100, Requirements. Trust Funds Master Plan III)

**Community Service Committee Use Only:**

Approved By: \_\_\_\_\_ Date: \_\_\_\_\_

Total Amount: \$ \_\_\_\_\_

Denied by: \_\_\_\_\_ Date: \_\_\_\_\_

Reason for Denial: \_\_\_\_\_