

Saint Regis Mohawk Tribe
Education Division
Tribal Learning Assistance Program Application

Shé:kon (Greetings),

This application is for all services under the Tribal Learning Assistance Program (a component of P.L. 102-477) of the Saint Regis Mohawk Tribe's Education Division. This is the starting point for signing up for:

- **Child Care Services**
- **Youth Services**
- **Higher Education**
- **Employment and Training Services**

This application helps us determine how to serve you and/or your child(ren). The information you provide is confidential. However, failure to complete all sections in this application may result in delays of processing or make it impossible to process at all. Your application will follow you through each service, so long as you keep your file active.

In order to be eligible for services, you must provide documentation listed on page 3 of this application. Also, note you will have to provide additional documents for the service you are requesting. Service specific documents can be provided upon request. Or at the time of your appointment with your Case Manager.

Once you have completed the application and handed in required documentation, a Case Manager will determine your service eligibility.

Please note:

- Expectant parents have the option of enrolling into Child Care Services before baby-to-be is born. Expectant mothers must complete the application in their name.
- For parents requesting Youth Services, fill out the application as it applies to your **child**.

Application Instructions (only one application is needed, per person, to cover all services):

1. Complete the entire application;
2. Hand in or send your application and required documents to the Intake Coordinator; and
3. Schedule a meeting with a Case Manager to complete an **Individual Success Plan**.

If you have questions or concerns, contact us at 518-358-9721 or e-mail education@srmt-nsn.gov.

Niá:wen (Thank You).



71 Margaret Terrance Memorial Way
Akwasasne, New York 13655

Phone: (518) 358-9721

Fax: (518) 333-5034

Working Together Today to Build a Better Tomorrow

Ska'tne ionkwaio'te ón:wa wenhniserá:te ne sén:ha aioianerénhake ne enióhrhen'ne

Application for Services

Carefully read Application Instructions on Page 1 BEFORE completing this application.

What service(s) are you applying for? (check all that apply)

Child Care Services

Youth Services

Higher Education Services

Employment and Training Services

If you have already applied for services in the last year, please call **518-358-9721 ext. 2275** to speak with our Intake Coordinator.

Name: _____
First Name Last Name Middle Name

Preferred or Community Name: _____

Tribal Enrollment #: _____ Tribe Name: _____

Social Security Card or Social Insurance Card # (attach copy of card): _____

D.O.B.: _____ Gender: Male Female Age: _____
MM/DD/YYYY

How would you prefer to be contacted? Phone E-mail Text Home Visit

Physical/Residential Address: _____ Mailing Address: _____

County: _____ Do you live in a rural area? Yes No

Primary Phone: _____ Other Phone: _____

E-mail: _____

Emergency Contact Name and Contact Information: _____

Do you have a disability? Yes No

If yes, please name type of disability (physical, mental, and/or sensory): _____

Current Veteran Status:

Veteran Transitioning Service Member Campaign Veteran Disabled Veteran N/A

Current Marital Status:

Single Married Divorced Separated Widowed Common Law

Current educational status:

In school, high school or less Not attending school, high school drop out
In school, post high school Not attending school, high school graduate
In school, alternative school

Current Employment Status:

Full time Part time Unemployed

Current Hourly Wage: \$ _____

Applicant's Agreement of Understanding and Release of Information:

I hereby certify that the above information on this form is true and correct to the best of my knowledge. I understand I am completing this application for the Tribal Learning Assistance Program and the information provided is subject to review and verification. I understand starting the date of this application, I have **30 days to submit the required documentation** needed by the services I have requested. And I may have to provide additional information. I am aware that **enrollment into service(s) is based on eligibility, the availability of the service, and my space on any waitlist I may be placed on.** I will comply with guidelines set forth by the Saint Regis Mohawk Tribe Education Division and its services.

I, _____ hereby authorize the release of information requested by the Saint Regis Mohawk Tribe's Education Division Tribal Learning Assistance Program. The requested information shall be used solely in the administration of Tribal Learning Assistance Program services. I hereby authorize the Saint Regis Mohawk Tribe Tribal Learning Assistance Program to obtain and exchange information related to my application to participate in their services. This release of information shall be in effect while I am an applicant or recipient of Tribal Learning Assistance Program services, and for any later inquiries pertaining to my eligibility and receipt of Tribal Learning Assistance Program benefits.

Further, this authorization is valid to obtain immunization records from the Saint Regis Mohawk Health Services **(Initial ____)**.

Applicant or Minor's Name & D.O.B

Applicant Signature

Date

Parent/Guardian Name **(PRINT)**

Parent/Guardian Signature

Date

Witness Name **(PRINT)**

Witness Signature

Date

You must attach to your application:

- _____ Copy of your tribal enrollment card or official tribal enrollment letter for yourself
- _____ Copy of tribal enrollment card or official enrollment letter for any children needing services
- _____ One proof of residency form (***PO Boxes will not be accepted!***)

Examples of proof of residency:

Utility bill	Landline phone bill
Driver's license	Bank statement
Car registration or title	Government issued photo ID
Letter form the government/court	Lease agreement
Pay stub	Health insurance card
Passport	Voter registration card

If you don't have some type of proof of residency, you must request a "Primary Tenant/Landlord/Shelter Statement". It must be notarized.

Due to COVID-19, the Education Division offices are closed to the public. But, you may submit your application and supporting documents electronically, by mail, e-mail, or fax. Also, applications can be dropped off at the front desk reception of Ionkwakiohkwaró:ron Saint Regis Mohawk Tribe building.

Mailing Address: Saint Regis Mohawk Tribe
Education Division
71 Margaret Terrance Memorial Way
Akwesasne, NY 13655

E-mail: education@srmt-nsn.gov

Fax: 518-333-5034

If you need assistance with the application or have questions/concerns about your application, please contact our **Intake Coordinator:**

Phone: 518-358-2272 ext. 2275

E-mail: education@srmt-nsn.gov