



Saint Regis Mohawk Tribe Community Partnership Fund 2022 Application Form

Please refer to application guidelines prior to completing. Application must be submitted on the Saint Regis Mohawk Tribe Community Partnership Fund form for consideration.

Any incomplete applications will be returned.

Application must be submitted to committee prior to monthly meeting and scheduled event.

APPLICATION INFORMATION (Complete all parts)

Applicant's Name:	<input type="text"/>
Individual, Team or event:	<input type="text"/>
Contact Person:	<input type="text"/>
Mailing Address:	<input type="text"/>
Home Telephone:	<input type="text"/>
Business Telephone:	<input type="text"/>
Cell Number:	<input type="text"/>
E-Mail:	<input type="text"/>
If approved - Issue check to:	<input type="text"/>

PLEASE CHECK THOSE AREAS THAT APPLY TO YOUR APPLICATION:

- | | |
|---|---|
| <input type="checkbox"/> Youth Athletes/Teams | <input type="checkbox"/> Youth Sports Association |
| <input type="checkbox"/> Community Event | <input type="checkbox"/> Community Development |
| <input type="checkbox"/> Fundraisers | <input type="checkbox"/> Other |
| <input type="checkbox"/> Cultural Enrichment | |

PROJECT INFORMATION

Title / Name:

Date of Event:

Brief Project Description (Additional information may be attached - maximum of one Page).

SUMMARY REPORT: Please attached this to the community services letter

Brief description of the community services that you have performed.

Community Service for this request must be completed after approval and within 12 months.

We ask that Community Services be done as part of you giving back and helping the community. Below is a partial list of organizations that your group, team, etc. can volunteer at. Once you have fulfilled your obligation, please provide a signed letter from the organization that you helped out. Failure to complete community services may affect future funding.

Event	Contact Person	Phone Number
Annual Roadside Clean Up	Craig Arquette	518-358-5937
Annual Pow Wow	Larry King	613-575-2348
Kateri Hall	Lucille Peters	518-358-2931
Iakhihsohtha	Mae Lazore-Green	613-575-2507
Tsiionkwanonhso:te	Barry Lazore	613-932-1409
Generations Park	Amberdawn LaFrance	518-358-2272
Oherakon - Rites of Passage	Louise McDonald	via FB Page
Tribal Farm	Wally Ransom	518-358-5937

These are just a few to mention, but at certain times of the year, the three Recreations centers, seniors programs and minor associations, need assistance with setting up for Christmas dinners, craft fairs, or assistance with the younger kids on the ice or in the field.

BUDGET: what will the funds be going towards (i.e. registration, travel costs
 purchase of equipment, rental fees, tournament fees, purchase of raffle items etc.)
**Feel free to use additional Pages or format to describe project or event budget*
-please attach supporting documents

PROJECT COSTS (space rental, contractors, supplies, etc.)	AMOUNT

TOTAL COSTS

Please list all other sources where you have applied for assistance or been funded from.

OTHER SOURCES OF FUNDING	AMOUNT

OTHER SOURCES FUNDING TOTAL

PROJECT COSTS

***REQUEST FROM DONATION FUND

FOR OFFICE USE ONLY

DATE RECEIVED

APPROVED / DENIED

DATE OF MEETING

APPROVED FOR

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DECLARATION

I/We agree to provide the necessary documents as required and requested (I.e. financial statements, supplier quotes).

I/We agree that if our application is approved, I/we will meet the reporting requirements as outlined in the project guidelines. We understand that failure to meet the reporting requirements will affect any future applications we may wish to submit to the Saint Regis Mohawk Tribe Community Partnership Fund.

I/We confirm that the information contained in this application and the accompanying documents is true, accurate and complete.

I/We agree that should the event get cancelled for any reason, that the issued check will be returned back to the Saint Regis Mohawk Tribe and failure to do so will result in denial of any future requests.

I/We understand that this funding is a once in a 12 month time frame, and can not re-apply until one year (12 months) is up.

This application form must be signed by at least **two** individuals who are over the age of majority (18 years of age).

SIGNATURES

Name:	_____	Signature:	_____
Title:	_____	Date:	_____
	Title/Relationship to Applicant		
Name:	_____	Signature:	_____
	Title/Relationship to Applicant		
Title:	_____	Date:	_____

SUBMISSION

This application Form must be submitted to the following:

Mailing Address: Saint Regis Mohawk Tribe Community Partnership Fund
c/o Saint Regis Mohawk Tribe
71 Margaret Terrance Memorial Way
Akwesasne, NY 13655

Location Drop Off: Saint Regis Mohawk Tribe Community Building
Executive Directors Office
71 Margaret Terrance Memorial Way
Akwesasne, NY 13655

Telephone Number 518-358-2272

The application form must be received by the Donation Committee **prior** to the meeting which is held the third Tuesday of each month.

All late submissions (turned in after meeting) must wait until next meeting the following month.