



## SAULT TRIBE YOUTH DEVELOPMENT FUND APPLICATION CHECKLIST

**All applications must include the following information:**

- **Completed application**
- **Copy of student's tribal card (expired cards not accepted)**
- **Proof of income (most recent check stub, tax forms, W-2, etc.)**
- **Invoice, registration, or brochure/literature with organization's name and costs or receipt of payment**

**ALL documents MUST be submitted to:**  
**Laura Porterfield, Administrative Assistant, Education**  
**523 Ashmun Street, Sault Ste. Marie, MI 49783**  
or emailed to [LPorterfield@saulttribe.net](mailto:LPorterfield@saulttribe.net) or fax to 906.632.6789  
**Questions? Email Laura or call her at 906.635.6050 Ext. 26332.**

## SAULT STE. MARIE TRIBE OF CHIPPEWA INDIANS

### TRIBAL YOUTH DEVELOPMENT CRITERIA

Tribal Youth may request funding for a variety of purposes to be expended outside of Tribal programming, to include:

- sport fees (registration, equipment, shoes)
- music, dance and theatre lessons
- instrument purchase and rental
- language lessons
- camps (sports, band, art, academic) and related travel fees
- educational, cultural and class trips
- testing fees
- driver's education
- senior pictures
- school supplies and book deposits (school clothes NOT included)
- regalia and youth drum

### APPLICANT QUALIFICATIONS

- Must be a tribal youth age 0 – 12<sup>th</sup> grade living within the seven county service area. (Seven county service area includes: Alger, Chippewa, Delta, Luce, Mackinac, Marquette and Schoolcraft counties)
- Applicants may receive funding, up to \$150.00 once per academic year (August 1 – July 31).
- Qualifying categories for funding are based on Tribal Strategic Directions of medicine wheel: academic/intellectual, physical, emotional and cultural/spiritual.

### APPLICANT REQUIREMENTS

- Applicant must **submit** current copy of Tribal Membership Card with application.
- Applicant must **submit** copy of invoice, registration, brochure/literature with organization's name and costs or receipt of payment with application. (Check will be made payable to the organization, unless receipt of payment is provided.)
- Applicant must **submit** proof of Household Income (recent check stub, tax forms, W-2, etc.). Income Guidelines are based on 300% of the 2016 HHS Poverty Guidelines.

**Submit applications for funding to Laura Porterfield, Sault Tribe Administration, 523 Ashmun St., Sault Ste. Marie, MI 49783. Applications can also be submitted via fax at 906-632-6789 or via email at [lporterfield@saulttribe.net](mailto:lporterfield@saulttribe.net). For more information, please call 906-635-6050 x26332.**

# Sault Ste. Marie Tribe of Chippewa Indians Application for Tribal Youth Development

## Section I – Applicant Information (one application per child)

Youth Name \_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_  
 Parent(s)/Guardian(s) \_\_\_\_\_ Foster Child (Y/N) \_\_\_\_\_  
 Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_  
 Daytime Phone (\_\_\_\_) \_\_\_\_\_ Evening Phone (\_\_\_\_) \_\_\_\_\_  
 Email Address \_\_\_\_\_ Family Size \_\_\_\_\_

**Please attach a copy of the youth applicant's current tribal card.  
 Applications will not be processed if tribal card is not attached or outdated.**

## Section II – Request Information

Purpose of Request \_\_\_\_\_  
 Amount of Funds Requested \_\_\_\_\_  
 Organization Name & Address \_\_\_\_\_  
 (i.e. SMHA, Soo Soccer Assoc., etc.) \_\_\_\_\_  
 \_\_\_\_\_  
 Date of Activity: Beginning \_\_\_\_\_ Ending \_\_\_\_\_

**Please attach a copy of invoice, registration, brochure/literature with  
 organization's name and costs or receipt of payment.  
 Checks will be made payable to the organization listed above unless otherwise indicated.**

## Section III – Income Information

Please list income for all persons residing at the address listed above:

Name	Date of Birth	Social Security Number	Monthly Gross Income (pay amount before deductions)	Supplemental Income (state/gov. aid, alimony, etc.)	Fixed Monthly Payments (Pension, Retirement, or Social Security )

Do you own/operate a business? (Y/N) \_\_\_\_\_  
 If you answered "Yes", please attach proof of earnings or loss from business.

**Please attach proof of income (most recent check stub, tax forms, W-2, etc...)  
 Applications cannot be processed if proof of income is not attached.**

All information obtained in this application will be treated as privileged and confidential and will not be released or revealed to any other persons without prior written consent of applicant.

I certify that all the information given is true and correct and that all income is reported. I understand that this information is being given for the receipt of funds; and I authorize Sault Tribe program officials to verify the information on this application; and that deliberate misrepresentation of the information may subject suspension from the program and/or require return of funds.

\_\_\_\_\_  
Signature of Parent or Guardian

\_\_\_\_\_  
Date

Submit application to: Sault Ste. Marie Tribe of Chippewa Indians  
Attn. Laura Porterfield  
523 Ashmun Street  
Sault Ste. Marie, MI 49783

Or Fax to: 906-632-6789 / Email: [lporterfield@saulttribe.net](mailto:lporterfield@saulttribe.net)

For Office Use Only

Date Application Received \_\_\_\_\_

Approved _____	Date _____
Amount _____	Letter sent _____
DV# _____	
Check # _____	
Date Sent _____	

Denied _____	Date _____
Letter sent _____	
Reason: _____	
_____	
_____	

Additional Comments \_\_\_\_\_

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## 2016 HHS Poverty Guidelines

Persons in Family or Household	48 Contiguous States and D.C.	*300%
1	\$11,880	\$35,640
2	\$16,020	\$48,060
3	\$20,160	\$60,480
4	\$24,300	\$72,900
5	\$28,440	\$85,320
6	\$32,580	\$97,740
7	\$36,730	\$110,190
8	\$40,890	\$122,670
For each additional person, add	\$4,160	

Source: Federal Register Notice, January 25, 2016