



Seneca-Cayuga Nation
COVID-19 Emergency Relief Aid Application
Cover Sheet

Applications DUE 9/30/2021

Date: 7/5/2021

Dear Tribal Members:

The Seneca-Cayuga Nation is pleased to announce that financial relief aid has been made available to the enrolled members of the Nation under the United States Department of Treasury's American Rescue Plan Act (ARPA) with the intention to alleviate the financial burden caused by the COVID-19 pandemic.

The financial assistance will be given to elders 55+ in the amount of \$2,000; adults 18+ in the amount of \$1,500; and minor children in the amount of \$1,000, per person. Only parents/legal guardians will have the authority to apply on behalf of the minor child.

The application period will end on 9/30/2021, no further applications will be processed after this date.

Below you will find the application checklist, list of required verifications, and the application form.

Eligibility:

- Enrolled Tribal Member of the Seneca-Cayuga Nation; and
- Unemployed, experienced an increase in living expenses, experienced a decrease in income, or low-moderate income based on household size.

Application Checklist:

- Completed Application Form
- Tribal Enrollment Card/Citizen Verification

COVID-19 Emergency Relief Aid Application Form

Applications DUE 9/30/2021

Applicant Name: _____ Date of Birth: _____

Applicant Enrollment #: _____ (Please attach copy of Tribal ID)

Mailing Address: _____

City: _____ State: _____ Zip code: _____

New Address? If yes, please check this box.

Phone #: _____

Email: _____

Names, dates of birth and roll number of any Tribal Members that are minor children and are residing in the Applicant's residence:

1. _____;
2. _____;
3. _____;
4. _____;
5. _____;

(Please attached copies of Tribal ID for all minor children claimed).

How has COVID-19 impacted you and your household? Check all that apply:

- Currently Unemployed; or
- Experienced an increase in expenses; or
- Experienced a decrease in income; or
- Currently identify as being low-moderate income (*gross earnings are under the 300% Federal Poverty Guidelines based on household size, see chart below*).

Household Size	Monthly Income
1	3,220
2	4,355
3	5,490
4	6,625
5	7,760
6	8,895
7	10,030
8	11,165

9	13,285
10	14,405

Other, please explain: _____

CERTIFICATION

By signing this certification, I affirm that all information is true and complete. I further agree that the funds distributed by the Tribe shall be used to purchase only essential allowable goods and necessary services to relieve the negative financial impacts of COVID-19, as more fully described in provisions 2.4 and 2.5 of the Seneca-Cayuga Nation’s COVID-19 General Welfare Assistance Programs, Policy and Procedures which can be found on the Nation’s website, www.sctribe.com.

If applicant is a minor child, all aid will be given directly to the parent/legal guardian on behalf of the minor and the parent/legal guardian agrees to use funds for minor child’s basic, education, and/or health needs in order to address the effects that COVID-19 has had on youth.

Printed Name

Signature

Date

Submit by Mail:

Seneca-Cayuga Nation
Attn: Covid-19 Relief
PO Box 453220
Grove, OK 74344

Submit by email:

Jean James-Yankowski
jyankowski@sctribe.com