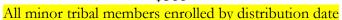


## WINNEBAGO TRIBE OF NEBRASKA

## CLOTHING ALLOWANCE ADDRESS VERIFICATION FORM

2022-2023sy \$500



Who currently attending school and between the ages of 3 to 18 years old shall be eligible for the clothing allowance

Distribution date: August 2. 2022 (Tuesday) 9:00am-7:00pm HoChunk Center August 3, 2022 (Wednesday) 9:00am-7:00pm HoChunk Center

\*\*NOTE: This clothing allowance INCLUDES the winter coat allowance of \$150.

REMEMBER verification of school enrollment MUST BE provided for all pre-school (3 & 4 yr. old), High School (9th-12th grade), and College (17 & 18 yr. old who <u>HAVE NOT</u> withdrawn his/her Tribal Minor Trust Fund monies).

## ANY FORM THAT IS FAXED OR EMAILED WILL NOT BE ACCEPTED. ALL CARDS MUST BE CLAIMED BY OCTOBER 31, 2022.

Once the card is picked up or mailed, the Winnebago Tribe of Nebraska is NOT responsible for it. Please call the number

Please mail forms to: Enrollment 1030 Buffalo Trail Suite #110 Winnebago, NE 68071

DO NOT MAIL FORM: IF YOU INTEND OF PICKING UP



Subject for applicable laws, the following fees apply to your card. Inactivity Fee- Beginning the 13th month of inactivity fee of \$2.50 will be applied to your card.

provided by the card company for any tracking, reports of a card lost or stolen or any other questions pertaining to your individual Visa card. NAME:\_\_\_\_\_\_ ENROLLMENT NUMBER 383-U0\_\_\_\_\_ DATE OF BIRTH:\_\_\_\_\_AGE:\_\_\_\_PHONE NUMBER:\_\_\_\_ MAILING ADDRESS(STREET, P.O BOX):\_\_\_\_ STATE:\_ ZIP CODE: !! LEGAL GUARDIANS MUST PROVIDE GUARDIANSHIP PAPERS !! PRESCHOOL/ELEMENTARY/HIGHSCHOOL/POST SECONDARY EDUCATION INSTITUTION INFO: SCHOOL NAME: SCHOOL PHONE NUMBER GRADE: \*Acceptable forms of Verification are the 2022-2023sy Class registration, Class schedule or School letter\* \*\*NO PAST TRANSCRIPTS\*\* NOTARY PUBLIC Signature of Parent/Legal Guardian or Applicant (If 18): PRINT NAME:\_\_\_\_\_\_ SIGNATURE:\_\_\_\_\_ Sworn to and subscribed to before me this \_\_\_\_\_ day of \_\_\_\_\_ 2022 (Seal) Notary Signature Expiration Date \*\*\*For Office Use Only\*\*\*

Gift Card #\_\_\_\_\_ Pin # \_\_\_\_ Date Rec'd\_\_\_\_ Date Issues/Mailed\_\_\_\_ Enrollment\_\_\_\_ Finance\_\_\_\_