MUSCOGEE (CREEK) NATION
SPECIAL ACADEMIC/EXTRA-CURRICULAR
ACADEMIC ACTIVITIES
NCA 00-136 GRANT

INFORMATION SHEET

PLEASE READ CAREFULLY: Applicants MUST complete this application and submit all requested documentation. Incomplete applications will NOT be considered.

NCA 00-136 is designed to address the needs Muscogee (Creek) students who have exhausted all other funding sources to meet their need and WHO ARE NOT RECEIVING ANY TYPE OF FINANCIAL ASSISTANCE FROM ANY OTHER TRIBAL EDUCATION PROGRAM FOR THIS SPECIFIC NEED.

GRANT INFORMATION:
1. The NCA 00-136 Grant will assist eligible students with approved needs ONE TIME, that may range up to a maximum of $500 based on financial need. Special Academic & school related Extra-Curricular activities.
2. This grant is SUPPLEMENTAL financial assistance and should not be seen as the total funding source for any specific need.
3. We do not do reimbursements.
4. The Recipient will be required to sign a statement that all receipts will be submitted to the reviewing committee within two (2) weeks of the grant being utilized. Funds must be used for the purpose approved by the reviewing committee.
5. The Grant Award is non-transferrable and must be utilized by the applicant for approved need only.
6. If funds are not used in the manner approved by the reviewing committee those funds are subject to be repaid by the recipient.
7. The Reviewing Committee has full discretionary authority in the administration of these funds.
8. If selected as a grant recipient, you will be notified by mail or phone from the Grant staff.

GRANT REQUIREMENTS: REQUIRED
1. Complete application (attached)
2. Copy of applicants MUSCOGEE (CREEK) NATION CITIZENSHIP card
3. Letter of acceptance or appointment from the academic organization (Special Academic), school sponsored educational or school sponsored athletic organization (Extra-Curricular)
4. A short (printed or typed) statement explaining your need
5. A budget breakdown:
   a. Expenses being incurred by the student (e.g., tuition, textbooks, on-campus housing costs)
   b. The amount of funds being requested
   c. Listing of funds raised by the student to assist in this endeavor (money you made from job, or donated to you)
6. Letter(s) of denial from alternative funding source(s) (letter from financial aid, bank, etc.)

Mail Application to: Muscogee (Creek) Nation
Department of Education & Training
ATTN: NCA 00-136 Grant
P.O. Box 580
Okmulgee, OK 74447

For Additional Information Contact the Department of Education & Training at: 918.732.7727 or 918.732.7741
E-Mail to: shwahnee@muscogeenation.com

01/06/2022
NCA 00-136 GRANT APPLICATION
(MUST BE COMPLETED IN FULL TO BE CONSIDERED)

DATE __________________

NAME ______________________________ SOCIAL SECURITY # __________

D.O.B / / SCHOOL __________________ GRADE ______

HOME ADDRESS ________________________________________________________

STREET CITY STATE ZIP

HOME/CELL PHONE ( ) __________________ WORK PHONE ( ) ______________

EMAIL: __________________________

Contact Person’s Name Representing School or Organization:

NAME __________________ PHONE ( ) __________________

Amount of Funds Being Requested: $ ______ Dates of Activities for the Funds:

DEADLINE IF ANY, for activity payment: __________

IF YOUR GRANT IS APPROVED THE CHECK WILL BE MADE PAYABLE AND MAILED TO:

SCHOOL/ORGANIZATION/COMPANY: ______________________________

ATTN: __________________________

ADDRESS: ______________________

________________________ CITY STATE ZIP

Please fill out and sign below. Eligible applicants under the age of 18 must have a parents/guardian’s consent and signature.

I/We, __________________, have read and understand the eligibility requirements of this grant from the Muscogee Creek Nation, NCA 00-136. I certify that all information provided is current and complete, including attachments. I/We affirm that the proceeds of this grant, as authorized under the Department of Education and Training and in ordinance per the Muscogee (Creek) Nation Legislation 2000 NCA 00-136, will be used solely for the purpose approved by the reviewing committee or will be subjected to repayment. I guarantee that I will deliver all receipts to the reviewing committee within two (2) weeks of the grant being utilized.

Student or Parent/Guardian Signature __________________________ Date __________

Check List:

Completed Application [ ] Copy of Citizenship Card [ ]
Acceptance Letter/Class Schedule [ ] Completed Statement of Need [ ]
Budget Breakdown [ ] Letter(s) of Denial [ ]

NCA 00-136 GRANT REVIEWING COMMITTEE USE ONLY

APPLICATION RECEIVED DATE: ____________________________

Date of Review: ____________________________

Review Team Members: E&TA [ ] JOM [ ] H ED. [ ]

Approved for assistance: YES [ ] NO [ ]

Amount to be awarded: $ ______

*Reason for Denial: ____________________________