



SNOQUALMIE INDIAN TRIBE

TRIBAL SERVICES ON-CAMPUS STUDENT HOUSING ASSISTANCE PROGRAM APPLICATION

APPLICATION

The Snoqualmie Indian Tribe has established the following criteria with the intent to ensure the Tribal Services On-Campus Student Housing Assistance Program provides assistance to meet the basic needs of the Tribal community.

CRITERIA FOR HOUSING ASSISTANCE

- A. To be eligible for On-Campus Student Housing Assistance, you must be:
 - 1. A Tribal Member enrolled in the Snoqualmie Indian Tribe and 18 years or older;
 - 2. Enrolled in a college or university with accreditation acceptable to the Tribe; and
 - 3. Approved to reside in On-Campus Student Housing, with documented On-Campus Student Housing expenses;
- B. Tribal Members may only receive assistance from either this Program or the Tribal Services Housing Assistance Program, not both.
- C. To apply for assistance from this Program, you must:
 - 1. Complete this Application;
 - 2. Provide an invoice from the housing operator that itemizes the On-Campus Student Housing expenses;
 - 3. Provide a W-9 for the housing operator; and
 - 4. Re-apply and be re-certified each year, or more frequently in the event of a change in circumstances or period of ineligibility for assistance from the Program.

LIMITS ON DISTRIBUTION

- A. Funds will be paid directly to the housing operator.
- B. Funding provided by this Program for On-Campus Student Housing cannot exceed \$18,000 USD in funding per approved Tribal Member, per fiscal year.
- C. The assistance from this Program may only be used for the following:
 - 1. Rent for the On-Campus Student Housing;
 - 2. Water, sewer, and garbage bills;
 - 3. Gas and electrical bills;
 - 4. Heat source supplies (firewood, propane, pellets, etc.); and
 - 5. Communications services such as phone, internet, and cable.



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PROGRAM REQUIREMENTS

- A. Tribal members receiving assistance from this Program must notify the Tribe's Housing Department within 72 hours after the occurrence of any of the following events:
 - 1. The Tribal Member receives a notice of eviction from the On-Campus Student Housing;
 - 2. The Tribal Member no longer resides in the On-Campus Student Housing listed on their Program application
 - 3. The Tribal Member withdraws, or is expelled, from the college/university.
- B. If pre-paid On-Campus Student Housing Assistance payments (or any portion thereof) are forfeited or repaid/reimbursed/refunded to anyone other than the Tribe as a result of any of the foregoing circumstances, then the Tribal Member may not be eligible for assistance under this Program until after:
 - 1. The Tribal Member has repaid those amounts to the Tribe or committed to a repayment plan that has been approved by the Community Services Director; and
 - 2. The Tribal Member has reapplied and been reapproved to participate in the Program.
- C. The Tribe reserves the right to pursue other available remedies at law and/or equity to recover misused funds.



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PERSONAL INFORMATION-----

Tribal Member Name: _____
Physical Address: _____
Mailing Address: _____
City, State and Zip _____
Email: _____
Phone (or best contact number): _____ Enrollment number: _____

STUDENT STATUS

School/Institution Name: _____
Student ID #: _____
Term Type (semester or quarter): _____
Estimated Cost of On Campus Housing: \$ _____

It is the intent of Tribal Council that the Program be funded from the Tribe's general fund, and that payments issued under the Program will not be subject to state or federal taxation and will not reduce fixed income or other benefits of the recipients. However, recipients should consult with their own tax and/or legal professionals to determine actual tax and benefit consequences and recommended uses.

By signing, I certify the information contained in this application is complete and accurate to the best of my knowledge. I understand that I am signing this under penalty of criminal prosecution if I knowingly give false information that results in payment to which I am not entitled. I agree that the Community Services Department may contact other Tribal programs for pertinent information as it applies to this application. I agree to repay any funds that the Tribe deems to have been misused, and that the Tribe may pursue any available remedies at law and/or equity to recover misused funds.

Signature: _____ Date: _____

**APPLICATIONS CAN BE SCANNED, FAXED, MAILED OR HAND DELIVERED TO THE
SNOQUALMIE TRIBAL OFFICE AT:**

ATTN: HOUSING DEPARTMENT
MAIL: P.O. 969, SNOQUALMIE, WA 98065

FAX: (206) 984-1586
EMAIL: HOUSING@SNOQUALMIETRIBE.US