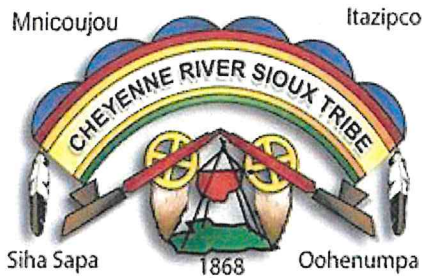


\*\*\*MASKS ARE NOT MANDATORY BUT PREFERRED\*\*\*



# CHEYENNE RIVER SIOUX TRIBE

## SUPPORT SERVICES

### 2022 WINTER CLOTHING

APPLICATIONS AVAILABLE

December 2, 2022

MUST BE TURNED IN

NO LATER THAN

January 31, 2023

\*\*\*\*\*

For more info,

Please call 605-964-6565

\*\*\*\*\*

Applications can be dropped off at  
support services or emailed to  
[ss.crst.jml@gmail.com](mailto:ss.crst.jml@gmail.com).

\*\*\*\*\*

We are not accepting apps via fax.  
PHONE NUMBER IS REQUIRED ON APP!

#### NEW Applicants

Must provide the  
following:

- CURRENT CUSTODY DOCUMENTS
- ALL INCOME:  
(EMPLOYMENT, SSI, TANF, GA, SNAP, VA, RETIREMENT, SOCIAL SECURITY, ETC.)
- TRIBAL ENROLLMENT DOCUMENT/I.D.
- SCHOOL ENROLLMENT VERIFICATION

#### Applicants who applied for Fall 2022: APPLICATION ONLY

\*\*\*ALL DOCUMENTS MUST BE ATTACHED\*\*\*  
OR IT WILL BE INCOMPLETE!

THANK YOU FOR YOUR PATIENCE AND COOPERATION AT THIS TIME

*Support Services Staff*



**MUST BE RESIDENT OF CRST** PHONE/MESSAGE \_\_\_\_\_

# CHEYENNE RIVER SIOUX TRIBE

## 2022 WINTER CLOTHING APPLICATION

**PARENT/GUARDIAN NAME:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **AGE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_ **CRU #:** \_\_\_\_\_

**MARITAL STATUS:** \_\_\_\_\_ **ALL SOURCES OF INCOME:** \_\_\_\_\_

**SPOUSE /S.O. NAME:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **AGE:** \_\_\_\_\_

<u>NAME</u>	<u>AGE</u>	<u>GRADE</u>	<u>CRU#</u>	<u>CUSTODY</u>	<u>SCHOOL NAME</u>
_____	_____	_____	# _____	<u>Y/N</u>	_____
_____	_____	_____	# _____	<u>Y/N</u>	_____
_____	_____	_____	# _____	<u>Y/N</u>	_____
_____	_____	_____	# _____	<u>Y/N</u>	_____
_____	_____	_____	# _____	<u>Y/N</u>	_____
_____	_____	_____	# _____	<u>Y/N</u>	_____
_____	_____	_____	# _____	<u>Y/N</u>	_____
_____	_____	_____	# _____	<u>Y/N</u>	_____

\*\*\*\*\*

**CIRCLE CHOICE OF VENDOR:      STATE BANK GIFT CARD**

\*\*\*\*\*

I, hereby authorize the Cheyenne River Sioux Tribe to obtain any necessary information to support our eligibility for assistance.

\_\_\_\_\_  
Applicant Signature \_\_\_\_\_  
Date

Denial/Reason: \_\_\_\_\_ Amount: \_\_\_\_\_

Approval: \_\_\_\_\_