

SOCIAL SERVICES DEPARTMENT

PO BOX 825~ANADARKO OK~73005~PHONE (405)247-2448~FAX(405)247-5942

H.S. & College Graduation Assistance Program

The High School & College Graduation Assistance Program will be available to graduating High School & College Senior's to help with the following options **ONLY**:

1. Senior Pictures **up to \$275**
2. Graduation Announcements **up to \$75**
3. Cap & Gown **up to \$50**
4. Test Prep **up to \$10**

All payments will be mailed and made payable to the vendor.

ELIGIBILITY REQUIREMENTS:

- Must be an enrolled Delaware Nation citizen
- Must have an overall 2.5 GPA
- Must have no more than 5 days of unexcused absences in one semester
- Must submit application 30-45 days prior to graduation date

REQUIRED DOCUMENTS:

- Submit a completed application and supportive documents
- Submit a copy of CDIB card
- **Must submit invoices for senior pictures, announcements, cap & gown, and test prep with application**
- Submit a copy of high school transcript and current report card that reflects attendance
- Submit a typed essay stating:
 - Applicant's name and what school attended
 - Applicant's Age
 - List type of extracurricular activities the student was involved in such as:
 - Athletics
 - Culture, Academic and/or Art clubs
 - Volunteer work or Community Service
 - Internships
 - Employment
 - The future plans the applicant has after graduation.

APPROVAL NOTIFICATION:

Approval notifications will be emailed to the applicant's email address stated on the application.

SERVICES AREA:

NATIONWIDE



DELAWARE NATION

Education Department

PO Box 825

Anadarko, OK 73005

High School & College Graduation Assistance Program

Applicant Information

Full Name: _____ Role #: _____
Last/First/M.I.

Address: _____
Street Address *Apartment/Unit #*

City *State* *ZIP Code*

Phone: _____ Email _____

Date of birth: _____ Social Security No.: _____

Are you requesting assistance with *CAP & GOWN?* YES NO Amount of invoice \$ _____

Are you requesting assistance with *SENIOR PICTURES?* YES NO Amount of invoice \$ _____

Are you requesting assistance with *ANNOUNCEMENTS?* YES NO Amount of invoice \$ _____

Are you requesting assistance with *TEST PREP?* YES NO Test Fee \$ _____

School Information

Please attach a copy of TRANSCRIPT and/or CURRENT REPORT CARD to application

School Information

School: _____ Graduation Date _____

Address: _____ GPA: _____

Street

City

State

Zip Code

I hereby certify that this application is true to the best of my knowledge. It is my responsibility to submit a copy of all invoices, high school and/or college transcript and CDIB card to the Delaware Nation Education Department office.

PRINT Student Name

Date

OFFICE USE ONLY

Approved Denied

Education Department Signature

Date