

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 High School & College Senior's to help with the following options **ONLY**:

1. Senior Pictures up to **\$275**
2. Graduation Announcements up to **\$125**
3. Cap & Gown up to **\$100**

ELIGIBILITY REQUIREMENTS

- Must be enrolled with the Delaware Nation
- High School & College Senior must have at least a 2.5 overall GPA
- **APPLICATION DEADLINE**: 30 days before graduation date.
- Applications will be reviewed for completeness and eligibility. Application approvals will be done in writing by the Delaware Nation Education Office.
- All checks will be made payable and mailed to the vendor.
- **NO REIMBURSEMENTS** will be made for purchases made prior to this application.

REQUIRED DOCUMENTS

- Complete application with supportive documents.
- Copy of CDIB card
- Invoices **MUST** be submitted with application.
- Copy of high school transcript and current report card. Must reflect attendance.
- Invoices for senior pictures, graduation announcements and cap & gown must be submitted with complete application.
- A typed essay stating:
 - ✓ The name of applicant and what school student attends
 - ✓ Age of student
 - ✓ List type of extracurricular activities the student is 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.

SERVICES AREA

Nationwide

Applications may be submitted to ssapplications@delawarenation-nsn.gov, by mail, fax or in-person at the Delaware Nation Complex.



DELAWARE NATION

Education Department

PO Box 825

Anadarko, OK 73005

High School & College Graduation Assistance Program

Applicant Information

Full Name: _____ Roll #: _____
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 \$ _____

School Information

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

School Information

School: _____ Graduation Date _____

Address: _____ GPA: _____

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