

Muscogee (Creek) Nation Tribal TANF Program Eligibility Form

Main line : 918-732-7985

Fax line : 918-758-1477

800 Number: 1-800-482-1979

Tulsa: 918-549-2484

Wetumka: 405-452-1109

Date: ____ - ____ - ____

Applicant Name: _____

Address: _____

Length at address: ____ mo/yr

Phone #: ____ - ____ - ____

Alternate #: ____ - ____ - ____

Please circle the county you reside in: Creek Okfuskee Okmulgee Hughes

Tulsa

Wagoner

Rogers

Mayes

Muskogee

McIntosh

Seminole

Are you a veteran? Yes ____ NO ____ What tribe are you enrolled in? _____

Roll number: _____ How many children do you have in the home? _____

What tribe are the children enrolled in? _____

Roll number: _____

Roll number: _____

Roll number: _____

Has Legal custody been established? Yes No N/A Documentation: _____

If No legal custody, can documentation be provided to support physical custody? YES NO

Are any of the children in Tribal/DHS custody? Yes No N/A

Current marital status? Single Divorced Married Separated Widowed

Is there another adult in the home? Yes No Relation to applicant: _____

Has Child Support been filed on the absent parent(s)? Yes No N/A Agency: MCN State

Any type of income received in the home? Yes No

Employment: \$ _____ Child Support: \$ _____ Social Security Assistance: \$ _____ Other: \$ _____

Any drug related convictions in the past 3 years? Yes No Date of conviction: ____/____/____

Have you received any TANF/Cash Assistance since 1996? Yes No

Are you currently receiving TANF? Yes No Date received: ____/____/____

I have received TANF/Cash Assistance from?

Agency _____

Date received: ____/____/____

Agency _____

Date received: ____/____/____

Since 1996, I have lived in the following locations: _____

Applicant Signature: _____

Date: ____/____/____

I certify under penalty of perjury that all the above information is true and complete. I understand that falsification of any information is grounds for fraud & termination/denial from the Tribal TANF program.

Date of Appointment: ____/____/____

Time: ____ am/pm

Mail date for Intake Reminder, Required Documents list & Assessment: ____/____/____

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Co-Applicant Information

Date: ____ - ____ - ____

Co-applicant Name: _____

Relation to applicant: _____

Address: _____

Length at address: ____ mo/yrs

Phone #: ____ - ____ - ____

Alternate #: ____ - ____ - ____

Please circle the county you reside in: Creek Okfuskee Okmulgee Hughes

Tulsa

Wagoner

Rogers

Mayes

Muskogee

McIntosh

Seminole

Are you a Veteran? Yes ____ No ____ What tribe are you enrolled in? _____

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What tribe are the children enrolled in? _____

Roll number: _____

Roll number: _____

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Employment: \$ _____ Child Support: \$ _____ Social Security Assistance: \$ _____ Other: \$ _____

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Are you currently receiving TANF? Yes No N/A

Date received: ____/____/____

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Agency _____

Date received: ____/____/____

Agency _____

Date received: ____/____/____

Since 1996, I have lived in the following locations: _____

Co-Applicant Signature: _____

Date: ____/____/____

I certify under penalty of perjury that all of the above information is true and complete. I understand that falsification of any information is grounds for fraud & termination/denial from the Tribal TANF program.