



the
**Chickasaw
Nation**

Bill Anoatubby
Governor

Department of Community Services / Youth Services Division
Youth Support / Clothing Grant
231 Seabrook Road / Ada, OK 74820 / (580) 272-5585

Youth Services Clothing Grant Application

Parent/Legal Guardian Information:

Name: _____
First Middle Last Suffix

Mailing address: _____
Street City State ZIP

Physical address: _____
Street City State ZIP

Home phone no.: (____) _____ Cell phone no.: (____) _____

Birth date: _____ Email address: _____

School Information:

School name: _____

School city: _____ State: _____ District: _____

Student Information – Please list all Chickasaw students in household					
Full name (first, middle, last, suffix)	Birth date (mm/dd/yyyy)	Age	School name	Grade	Homeschooled Y/N

Parent/legal guardian signature _____ Birth date: _____ (required for security purposes)

Authorized user: _____

Optional (this can be any person you would like to have access to your account)

Password or PIN no.: _____

*Authorized person will need password/PIN no. to access account for release of information or to activate card.

Date: _____

Is the signature above the custodial parent/legal guardian of the student? Yes No

NOTE: If not the custodial parent/legal guardian of the student, you must attach current documentation that the student is legally in your care.

******COMPLETED application must be postmarked or received by December 31st******

Return applications by mail or in person to:
 The Chickasaw Nation Youth Services Division
 231 Seabrook Road
 Ada, Oklahoma 74820

The Chickasaw Nation Youth Services Division and the applicant agree to strictly maintain the confidentiality of all information. Applicants agree that the information contained in said application will be considered "Confidential Information" and will not be disclosed to third persons, except upon written consent of the applicant or as otherwise required by law.