

Kickapoo Tribe of Oklahoma

Community Outreach Assistance Form

Applicant Name: _____

CDIB: _____

Telephone: _____

Dates of Travel: _____

Mailing Address: _____

Please check the appropriate assistance below:

Travel Request

Traditional Request

Lodging Request

Homeowner's Request

Purpose: _____

I understand that any damage(s) or additional charges to any rooms and/or vehicle assigned to me is my responsibility and I will pay for these costs. I also understand that I will not be eligible for lodging for six (6) months if I have outstanding costs owed for previous lodging/vehicle and if law enforcement is called out.

Applicant Signature: _____

Date: _____

(OFFICE USE ONLY)

Travel Request:

Adult

Transport

Fuel

Traditional:

Clan Leader

Asst. Clan Leader

Warrior

Singer/Cook

Hunter

Lodging:

Location: _____

Rate: _____

Nights: _____

Homeowners:

Completed

Incomplete

Total: \$ _____

Approved

Denied

Community Outreach Assistant: _____

Date: _____

Community Outreach Director: _____

Date: _____

Darwin Kaskaske
PEMOETAMOA
CHAIRMAN

Everett Sube
MOKITANOVA
VICE-CHAIRMAN

T. Sunny Downs
KAKACHIA
SECRETARY

Fanetta Mahtapene
KIOTHAHEQUAH
TREASURER

Evel Green
KOKIPAUNACUA
COUNCILPERSON