



SISSETON WAHPETON OYATE

COVID-19 Higher Education Assistance Application

Purpose

Through the COVID-19 Higher Education Assistance Program, the Sisseton-Wahpeton Oyate will provide computers or internet payment from August 1 to December 30, 2020 to Tribal members enrolled in post-secondary higher education programs to enable compliance with distance learning related to COVID-19 public health precautions.

Eligibility

1. The applicant must be an enrolled member of the Sisseton-Wahpeton Oyate.
2. The applicant must be enrolled in a post-secondary higher education program on a full- or part-time basis. With a minimum of six (6) credits.
3. The applicant must certify that he or she needs a computer or internet service in order comply with distance learning at his or her educational institution related to COVID-19 public health precautions.
4. The applicant must certify that he or she does not have a suitable computer or suitable internet service to enable compliance with distance learning at his or her educational institution.
5. The applicant must certify that he or she is not able to purchase a computer or internet service on his or her own due to unforeseen financial costs as a result of the COVID-19 public health emergency.
6. The applicant may not have received assistance from another government or program for the same relief for which assistance is sought through this program.
7. The applicant must secure and attach to the application:
 - a. Proof of enrollment in the Sisseton-Wahpeton Oyate
 - b. Proof of enrollment in a post-secondary educational institution
 - c. Statement from student or Certification from an administrator at the applicant's educational institution that the applicant needs a computer or internet service in order comply with distance learning related to COVID-19 public health precautions.



SISSETON WAHPETON OYATE
COVID-19 Higher Education Assistance Application

APPLICATION

Name: _____

Address: _____

Primary Phone: _____ City _____ State _____ Zip _____
Email: _____

Enrollment #: _____ SSN: _____

DOB: _____ Sex (circle one): Male Female

College Attending: _____

Expected Degree: ___ Certificate ___ Associate ___ Bachelors ___ Masters ___ Doctorate

Certifications

Applicant certifies in good faith, subject to pains and penalties of perjury and other **punishments under the law**, that the following statements are true and correct by **initialing next to each line**:

- ___ The applicant is an enrolled member of the Sisseton-Wahpeton Oyate.
- ___ The applicant is enrolled in a post-secondary higher education program.
- ___ The applicant has experienced unforeseen financial costs relating to his or her education as a result of the COVID-19 public health emergency.
- ___ The applicant certifies that he or she needs a computer or internet service in order comply with distance learning at his or her educational institution related to COVID-19 public health precautions.
- ___ The applicant certifies that he or she is not able to purchase a computer or internet service on his or her own due to unforeseen financial costs as a result of the COVID-19 public health emergency.
- ___ The applicant has not received assistance from another government or program for the same relief for which assistance is sought through this program.
- ___ The applicant has secured and attached to this application the following supporting documentation:
 - ___ Proof of enrollment in the Sisseton-Wahpeton Oyate
 - ___ Proof of enrollment in a post-secondary educational institution
 - ___ Statement from student or Certification from an administrator at the applicant's educational institution that the applicant needs a computer or internet service in order comply with distance learning related to COVID-19 public health precautions
- ___ The applicant certified that the information contained in this application and supporting documentation is true and accurate in all material respects, and the applicant understands that knowingly making a false statement to obtain assistance from this program is punishable under the law

Signature: _____ Date: _____