SWO Youth Services Fund
Sponsorship Policy

The SWO Youth Activities and Service Fund will sponsor individual 5-17 years old activities subject to: Fitness/Sports events, School trips. Funds are to be used for youth activities that promote healthy, drug & alcohol free interaction among the youth. Individuals are eligible for funds within a 12-month fiscal year. They must be in good standing in school (FERPA application) to be considered for sponsorship funds. Each youth will have a total of $500 to spend for the fiscal year.

Group – SWO Members 5-17 years old (Traveling Teams, School trips, Etc)
Requirements:
• SWO tribal enrollment paper and FERPA forms completed
• Supporting documentation per request. (Hotel confirmation, Event flier, etc)
• Must not coincide with (individual request for same event)
• Expenditure report must be turned in 2 weeks prior to event
• Coverage – Hotel stay (4 per room), Entry Fee (All SWO Members)
• SWO Youth Overnight Policy completed before request processed

Individual - SWO Members 5-17 years old ($500)
Requirements:
• SWO tribal enrollment paper and FERPA form completed
• Supporting Documentation per request (Hotel confirmation, Event flier, Registration, etc)
• No equipment/Apparel purchases
• Expenditure report must be turned in 2 weeks prior to event
• Coverage – Hotel stay, Registration Fee, Meal Money ($15/meal)

Student Travel Policy (FERPA form)

Eligibility:
• Attendance
• School work (passing classes in accordance with school policy)
• Passing classes (school year sponsorship) and moving onto next grade (summer sponsorship)

The Sisseton Wahpeton Oyate has declared any person(s) who will be in charge of transportation/chaperone of any event taking place outside of school boundaries and are not considered a school sanctioned event, and this event is sponsored and/or paid for either partially or fully with Tribal monies, this policy will take effect.

*It shall be the responsibility of the person(s) involved with the transportation/chaperone of an event to see that any students traveling meet the eligibility requirements set forth by the school in which the student is attending. The tribal leaders consider that the students’ education be in the forefront of every activity in which he/she is involved with. Trips that are not considered a school sanctioned activity students will be considered absent from school and all persons involved in any event meeting these criteria have responsibility to adhere to this policy.

*Allowing any ineligible student to travel will result in suspension of funding
Non Directory Records Permission

The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. §1232g: 34 CFT Part 99) is a Federal law that protects the privacy of student education records.

Schools must have written permission from the parent or eligible student in order to release “non-directory” information from a student’s educational record.

To comply with the FERPA regulations the SWO Youth Department is requesting permission for program staff to have access to student attendance, behavior and academic data on a need-to-know basis. All staff have signed confidentiality forms and will ensure and safeguard your child(s) information. The data will be used to provide direct services to students identified as needing mentoring and additional support. Also, the data will be used to award eligibility for youth sponsorship request.

Your signature indicates your permission to release attendance, behavior and grades information from your child(s) educational record for the current school year only.

__________________________  ______________________
Parent/Guardian                          Date

Parent contact information: phone numbers/email address

Parent contact information: mailing address

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<tr>
<th>Child’s Name</th>
<th>School</th>
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Application (Please Print)

Individual (□) ($500)

Applicant Name: ____________________________ Age: _______ Date: __________

Parent/Guardian: __________________________

Mailing Address: ____________________________

Primary Phone: _______________ SWO District: __________________________

Group Name (If Applicable): __________________________

Have you received a sponsorship before? If so, when? __________________________

Please attach supporting documentation of request or use the following space to tell us why you are requesting assistance?

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

I, the below signed, attest the information provided on this application is true and correct. I understand that providing false information will jeopardize my eligibility for sponsorship.

__________________________ __________________________
Applicant Signature Date

Please Return to:
SWO Youth Department
45661 Veterans Memorial Drive
Agency Village, SD 57262
Ph: 605-742-0555
Fax: 605-742-0045

Email: derrickm@swo-nsn.gov or elisej@swo-nsn.gov