SUMMIT LAKE PAIUTE TRIBE
SPORTS REGISTRATION AND SPORTS EQUIPMENT ASSISTANCE PROGRAM
POLICY

This policy and procedures were adopted by the SUMMIT LAKE PAIUTE TRIBE by Resolution SL-01-2021 on January 9, 2021.

Policy Statement
The governing body (Council) of the SUMMIT LAKE PAIUTE TRIBE recognizes the need to develop a program that aids low-income tribal members whose needs cannot be met through the existing housing programs. This program is created to aid with the cost of sports registration and equipment in an effort to keep tribal member minors active, healthy, and focused in hopes they refrain from drugs, alcohol, and criminal offences. SUMMIT LAKE PAIUTE TRIBE will implement the Sports Registration and Sports Equipment Assistance Program in a manner consistent with the overall mission of the Summit Lake Paiute Tribe Housing Programs.

1. Definitions
   a. Annual Income
      1. The definition of Annual Income shall be the anticipated income from all sources expected to be received during the next 12 months by all family members. Per 24CFR1000.10 (b) (3), which states that annual income shall be the “Adjusted gross income as defined for purposes or reporting under Internal Revenue Service (IRS) Form 1040 series for individual Federal annual income tax purposes”.
      2. If an applicant or participant’s annual income is sporadic and not consistent from one year to the next (farming, firefighting, etc.), the Summit Lake Paiute Tribe may use the average annual income earned over the most recent three (3) years when determining eligibility and calculating monthly payments.
   b. Drug Related Criminal Activity
      1. The term ‘drug-related criminal activity’ means the illegal manufacture, sale, distribution, use, or possession with intent to manufacture, sell, distribute, or use, of a controlled substance (as such term is defined in section 102 of the Controlled Substances Act).
   c. Family
      1. Family is defined as a family with or without children, an elderly family, a near-elderly family, a disabled family, and a single person. Head of Household must be at least 21 years of age to qualify.
d. **Grievance**

1. Any complaint against a decision of the Summit Lake Paiute Tribe that is allowed in accordance with the Summit Lake Paiute Tribe housing grievance policy and procedures.

e. **HUD**

1. The U.S. Department of Housing and Urban Development.

f. **Indian**

1. Any person recognized as being an Indian or Alaska Native by an Indian Tribe, the Federal government, or any state.

g. **Indian Area**

1. The term 'Indian area' means the area designated by the Summit Lake Paiute Tribe.

h. **Indian Tribe**

1. The term ‘Indian tribe’ means a tribe that is a federally recognized tribe, or a State recognized tribe.

2. The term ‘federally recognized tribe’ means any Indian tribe, band, nation, or other organized group or community of Indians, including any Alaska Native village or regional or village corporation as defined in or established pursuant to the Alaska Native Claims Settlement Act, that is recognized as eligible for the special programs and services provided by the United States to Indians because of their status as Indians pursuant to the Indian Self-Determination and Education Assistance Act of 1975.

3. The term 'State recognized tribe' means any tribe, band, nation, pueblo, village, or community that has been recognized as an Indian tribe by any State.

i. **Low Income Family**

1. The term ‘low-income family’ means a family whose income does not exceed 80 percent of the median income for the area, as determined by HUD with adjustments for smaller and larger families.

j. **Median Income**

1. The term 'median income' means the greater of -
   i. the median income for Summit Lake Paiute Tribe Indian area, which the Secretary shall determine; or
   ii. the median income for the United States (state and/or county) that shall be an addendum to these procedures.

k. **NAHASDA**
1. The Native American Housing Assistance and Self-Determination Act passed by the U.S. Congress in 1996.

I. Payment Assistance

1. Assistance provided to a parent/guardian of an enrolled tribal member minor for sports registration and sports equipment.

2. In order to receive registration fee assistance, minor’s parent/guardian must pay registration fee, provide proof of payment along with a written form detailing the cost of registration. A payment will be reimbursed to the parent/guardian not to exceed $500.00.

3. In order to received sporting equipment assistance, minor’s parent/guardian must pay for sporting equipment needed to participate in specific sport. Minor’s parent/guardian must provide proof of payment for equipment needed to participate in specific sport. A payment will be reimbursed to the parent/guardian not to exceed $500.00 (including the cost of registration).

m. Tribal Member

1. An enrolled member of the Summit Lake Paiute Tribe, a federally recognized tribe.

2. General Information

a. Eligibility

1. The eligibility criteria for assistance utilizing this program shall be the same as those described in the Summit Lake Paiute Tribe adopted Eligibility Policies & Procedures.

2. Meets the definition of a Low-income family.

3. Minor must be a member of the Summit Lake Paiute Tribe and be between the ages of four (4) and seventeen (17).

4. Applications received from any family or person(s) not meeting the established criteria will be referred to other state or local agencies for housing assistance.

5. Applicants who owe Summit Lake Paiute Tribe money are not eligible to receive assistance.

6. A participant may not receive sports registration and equipment assistance while receiving the benefit from any other assistance program.

b. Term

1. Assistance is provided for enrolled tribal member minors.

2. Assistance approval is based on Annual Income rather than Adjusted Income.
3. Assistance will be provided for any sports leagues and equipment needed for that sport. (ex. Soccer, Basketball, Football, Cheerleading, Gymnastics, Baseball, Softball, Hockey, Golf etc.)

4. Assistance is not to exceed $500.00 in total for one sport which includes registration fees and sporting equipment. If any balance is remaining, it will be the applicant’s responsibility to pay.

5. Assistance will be provided two (2) times each FY for each enrolled tribal member minor which will total $1,000.00 or less (depending on cost).

3. Payments

a. Execution of agreement for assistance payments

1. An agreement will be signed by the parent/guardian of the enrolled tribal member minor detailing the assistance is a reimbursement.

2. If the sports league is cancelled; parent/guardian is required to repay the assistance that was provided.

3. If any equipment is returned, parent/guardian is required to repay the assistance that was provided.

4. Obligations

a. Participant Obligations

1. The family must:

   (1.) Supply any information requested by the Summit Lake Paiute Tribe’s Housing Department to verify the family income, cost of registration fee and sporting equipment; without that information, assistance will not be provided.

b. SUMMIT LAKE PAIUTE TRIBE - Obligations

1. The Summit Lake Paiute Tribe will reimburse the minor’s parent/guardian with the full dollar amount paid for the minor’s sports registration and sporting equipment; not to exceed $500.00 after proof of purchase has been provided.

5. Terminations

a. Termination of assistance by the Participant

1. If parent/guardian fails to repay any of the assistance due to circumstances listed in 4. Payments; a. Execution of agreement for assistance payments; 2. And 3., the parent/guardian will no longer be eligible for assistance provided through the Summit Lake Paiute Tribe’s Housing Department.
Sports Registration and Equipment Assistance Application

1. Parent/Guardians Name: ________________________________

2. Name of Minor participating in Sport: _______________________

3. SLPT Enrollment #: ___________

4. Minor’s Enrollment #: _______________

5. Current Address: ____________________________

6. Phone #: _____________________________

7. Msg #: _____________________________

8. List ALL persons living in the household: List any additional persons on another sheet of paper.

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<th>NAME</th>
<th>Relationship</th>
<th>DOB</th>
<th>Age</th>
<th>SSN</th>
<th>Working Y/N</th>
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9. Requesting Amount (must not exceed $500.00):

   Sports Registration Fee: ___________  Equipment: ___________

10. Income:

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<tr>
<th>Household Member</th>
<th>Name of Employer</th>
<th>Address of Employer</th>
<th>Employer Contact #</th>
<th>Rate of Pay</th>
<th>Frequency of Pay</th>
<th>Total Annual Income</th>
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*Please include all earned income, unearned income, general assistance, unemployment, family support, child support, TANF, SSI, SSA, etc. and provide proof of income received (ex. pay checks, award letters, court orders, etc.). If you have no income please complete the Self-Certification/Statement of No Income section*
11. Self-Certification/Statement of No Income:

I, ____________________________________________, certify that I have no income and therefore, I submit the following statement of how I am presently living with no income:

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signature: ___________________________ Date: __________________________

I CERTIFY that the information given to the Summit Lake Paiute Tribe Housing Department including family composition, income and deductions is accurate and complete to the best of my knowledge and belief. I understand that false statements or information is punishable under Federal Law and that it may result in my being disqualified for housing assistance. Further, I understand that if assistance is provided, I may be required to repay all program monies expended on my behalf if such misrepresentations are discovered later.

Signature: ___________________________ Date: __________________________

Print Name: ___________________________

AGREEMENT in accordance with Summit Lake Paiute Tribe’s Sports Registration and Equipment Assistance Program:

I hereby agree that if the sporting league is cancelled or if I return any of the equipment that was purchased for said sporting league, I will repay the assistance amount back to the Summit Lake Housing Department.

If I fail to abide by the terms of the agreement, I will no longer be eligible for any further assistance through the Housing Department’s Programs.

Signature: ___________________________ Date: __________________________

Print Name: ___________________________ SSN: __________________________

Housing Manager Signature: ___________________________ Date: __________________________
Authorization for Release of Information

Organization requesting Release of Information: (Full Address of requestor and telephone)
Summit Lake Paiute Tribe
2255 Green Vista Dr. Suite 402
Sparks, NV 89431
Phone: (775) 827-9670 Fax: (775) 827-9678

You are required to sign a consent form authorizing: (1) The Summit Lake Paiute Tribe (SLPT) to request verification of salary and wages from current or previous employers; (2) SLPT to request wage and unemployment compensation claim information from the state agency responsible for those benefits including online sources; (3) Any other agency or other entity which SLPT may request information regarding your application/unit or, i.e. BIA, IHS, Tribal Entities, and any other Public Entities as required and if necessary (4) SLPT to request a copy of your income tax return from the US Internal Revenue Service. The law also requires independent verification of income information. Therefore, SLPT may request information from financial institutions to verify your eligibility and level of benefits. (5) As required by Section 208 of the Native American Housing Assistance and Self-Determination Act (NAHASDA) (codified at 25 U.S.C. § 4138), Indian tribes or TDHEs are permitted to obtain criminal history records of current and prospective tenants of housing assisted with grant amounts provided to such tribes or TDHEs under this Act for purposes of applicant screening, lease enforcement, and eviction.

Who Must Sign the Consent Form: Each member of your household who is 18 years of age or older must sign this consent form. Additional signatures must be obtained from new adult members joining the household or whenever member of the household become 18 years of age.

Failure to Sign Consent Form: Your failure to sign the consent form may result in the denial of eligibility or termination from the assisted housing program. Denial of eligibility or termination of benefits is subject to the SLPT’s grievance procedures or informal hearing procedures.

Information may also be obtained directly from: (a) current and former employers concerning salary and wages and (b) financial institutions concerning unearned income (i.e., interest and dividends), (c) criminal history records thru police departments, other law enforcement agencies and tribal court.

I understand that income information obtained from these sources will be used to verify information that I provide in determining eligibility for assisted housing programs and the level of benefits. Therefore, this consent form only authorizes release directly from employers and financial institutions of information regarding any period(s) within the last five years when I have received assisted housing benefits and any other agency or entity regarding my unit.

Consent: I consent to allow Summit Lake Paiute Tribe to request and obtain criminal history and income information from the sources listed on this form for the purpose of verifying my eligibility or continued participation in the SLPT’s programs. I understand that SLPT receives income information under this consent form cannot use it to deny, reduce or terminate assistance without first independently verifying what the amount was, whether I actually had access to the funds and when the funds were received. In addition, I must be given an opportunity to contest those determinations.

This consent form expires 15 months after signed. _______________________________________.

Required Signature(s):

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<tr>
<th>Signature</th>
<th>Social Security Number</th>
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<td>Head of Household/Applicant</td>
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<td>Other Adult Family Member</td>
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<td>Other Adult Family Member</td>
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<td>Other Adult Family Member</td>
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Date