

Mailing Address: _____
Street City State Zip code

Desired Start Date: _____

Do you have any physical limitation that would interfere with your training? Yes ___ No ___

If yes, please explain _____

Desired program name: _____

Address: _____
Street City State Zip code

Do you have income from any other source? Yes ___ No ___

If yes, please explain _____

Employment Record: (List your three most recent employment placements)

1. Employer name: _____

Address: _____

Dates employed: _____

Job title: _____

Description of duties: _____

Reason for leaving: _____

2. Employer name: _____

Address: _____

Dates employed: _____

Job title: _____

Description of duties: _____

Reason for leaving: _____

3. Employer name: _____

Address: _____

Dates employed: _____

Job title: _____

Description of duties: _____

Reason for leaving: _____

Training Record:

Have you had vocational training of any type? Yes ___ No ___

If yes, give the following information:

Field of training _____

Training facility _____

Dates of training _____

Did you complete the training program? Yes ___ No ___

If you did not complete the program, please give a reason. _____

Certification of Accuracy of Information Given

I certify the information that I have given is correct and complete.

Signature of Applicant

Date



Billy Friend
Chief

64700 E. Hwy 60
Wyandotte, OK 74370

Norman Hildebrand, Jr.
2nd Chief

Phone: 918-678-2297
Fax: 918-678-2944

Checklist for Training Application

Please submit all items listed below with your application for training.

- _____ (1) Copy of your Wyandotte Nation Membership card.
- _____ (2) Copy of your Certificate Degree of Indian Blood card (CDIB).
- _____ (3) Copy of your Social Security Card.
- _____ (4) Information on the type of program/training you will be attending, along with contact information for the institution.
- _____ (5) Documentation of program/tuition cost.
- _____ (6) Documentation of other costs for program requirements. (Example: cost of tools, equipment, or other supplies required to complete the program that are not included in program cost or tuition.)
- _____ (7) Wallet size photo of applicant.
- _____ (8) A completed and signed application. (Attached)

Please note that on a case-by-case basis, additional items may be required. Applications will be processed when all items are received. We are looking forward to working with you soon!

Sincerely,

Cristi Hudson
Education Interim Director