

Pawnee Nation Emergency Assistance Program Application

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Full Name (As seen on PN Tribal Membership Card)

PN Tribal Membership Number #

Have you been financially affected by the recent storms?

YES

NO

If yes, please include a copy of a federal picture ID and a bill that matches your name to confirm your address is in the county named in the State of Emergency.

Address of affected home:

\_\_\_\_\_

Date of Birth for applicant:

\_\_\_\_\_

By signing this form, I agree that everything stated above is true and correct to the best of my knowledge. I also agree that the Pawnee Nation has the right to verify the information that I have provided. I also understand that any misuse or abuse of the emergency assistance program will result in prosecution and denial of any future assistance. I understand that the Pawnee Nation will process and provide assistance as long as funding is available and that the Pawnee Nation is not responsible for lost, stolen, or damaged cards. **Only one card per household.**

Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Please return applications to one of the following:

Email: [jj0588@pawneenation.org](mailto:jj0588@pawneenation.org)

Text: 405-880-3831

Mail: 881 Little Dee Rd Pawnee, OK 74058

In-person: Pawnee Nation Public Safety Center

301 Agency Rd Pawnee, OK 74058

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OFFICE USE ONLY

Date Received:

Received by:

Applicant verified

Yes

No

\_\_\_\_\_  
Verified by: Print Name & Position

\_\_\_\_\_  
Date Verified

Approved

Denied

CARD NUMBER ISSUED: \_\_\_\_\_