

# *Kenaitze Indian Tribe*

## STUDENT HOUSING

P.O. Box 988, Kenai, AK 99611  
Ph. (907) 335-0669, Fax (907) 335-0989  
[education@kenaitze.org](mailto:education@kenaitze.org) \* [www.kenaitze.org](http://www.kenaitze.org)

Kenaitze Employment and Training provide the service of housing scholarships to students who are pursuing Vocational/ Higher Education. **Application must be complete, or will be sent back.**

Basic Guidelines are as follows:

1. Kenaitze/Salamatof Tribal member (preference), Alaska Native or American Indian
2. Meet income limits listed below

1	2	3	4	5	6	7	8
38,200	43,650	49,100	54,550	58,900	67,650	67,650	72,000

3. Need established

### **Deadline for Application: August 1, 2009**

The following is required to complete your application. If copies of verification are not submitted with this application or are incomplete, your application will be returned to you.

- \_\_\_\_\_ Application form **completely filled out and signed** (KIT Form 1406)
- \_\_\_\_\_ Three years tax forms that were submitted to the IRS
- \_\_\_\_\_ Income verification, pay stubs for the last two pay periods (if applicable)
- \_\_\_\_\_ Verification of other income (dividends, other income)
- \_\_\_\_\_ Certificate of Indian blood
- \_\_\_\_\_ Copy of driver's license
- \_\_\_\_\_ Social Security Card
- \_\_\_\_\_ Leave/Rental Agreement OR Address of Landlord OR Dorm room expense
- \_\_\_\_\_ Proof of attendance OR Letter of Enrollment/ Acceptance into school
- \_\_\_\_\_ Copy of Financial Aid awarded from college signed by Financial Aid Office
- \_\_\_\_\_ W-9 Form from current landlord (if privately owned, personal SSN/address)

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## *Student Housing Application*

Please read and completely fill-out all questions to enable KIT/STC Housing to processing your application. Use additional paper if necessary. Print or type.

**GENERAL**

**email:**

Primary applicant first name	MI	Last	Home phone: Work phone:		
Co-Applicant first name	MI	Last	Work phone:		
Current physical address		City	State	Zip	
Mailing address		City	State	Zip	
Please list all persons who will be living in your home:					
Name	SSN	Marital Status	Gender	Age	Relationship
Applicant					
Co-Applicant					

**EMPLOYMENT**

Applicant's current employer	Date of hire
Employer's Address	City State Zip
Co-applicant's current employer	Date of hire
Employer's address	City State Zip

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**INCOME**

You must list all income earned or received by everyone listed on your application, including Native Corporation income. This includes all income from wages, self-employment, child support, social security, disability, longevity bones, retirement income, worker's compensation, etc. List gross amounts received and attach verification for all income. (Note: If you are self-employed, that income will be verified through your tax returns.) For more information about appropriate verification, please see the last page of this application form.

Family member	Source of Income	Gross monthly income	Yearly income	Verification attached
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

**EDUCATION**

Name of College/University			
Address	City	State	Zip
Student Status: <input type="checkbox"/> Freshman <input type="checkbox"/> Sophomore <input type="checkbox"/> Junior <input type="checkbox"/> Senior		Degree sought	

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-applicant

# Signature Authorization Form

To whom it may concern:

I hereby authorize Kenaitze/Salamatof Housing and Kenaitze Employment & Training, to verify my past and present employment earnings.

I also authorize the Social Security Administration or any other State or Government agency to release verification of my income, date of birth, the type of benefits, the effective date and the length of time the benefit will be received to Kenaitze/Salamatof Housing.

The information the Employment/Training office obtains is only to be used in the processing of my application for the housing scholarship.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Co-applicant

## Things you should know

**Purpose:** This is to inform you that there is certain information you must provide when applying for assisted housing. There are penalties that apply if you knowingly omit information or give false information.

**Penalties for committing fraud:** The United States Department of Housing and Urban Development places high priority on preventing fraud. If your application forms contain false or incomplete information, you may be:

1. Required to repay all overpaid housing assistance you received
2. Fined up to \$10,000.00
3. Imprisoned for up to five years
4. Prohibited from receiving future assistance

Your state and local government may have other laws as well.

**Completing the application:** When you give your answers to application questions, you must include the following information:

1. All sources of money you and any adult member of your family receive
2. Any money you receive on behalf of your children
3. Income from assets
4. Earnings from second job or part time job
5. Any anticipated income
6. All bank accounts, savings, bonds, certificates of deposit, stocks, estate that are owned by you and any adult member of your family who will be living with you
7. Any business or assets you sold in the last two years for less than it's value, such as your home
8. The names of all the people who will actually be living with you, whether or not they are related to you

**Signing the application:** Do not sign any form unless you have read it, understand it, and are sure everything is complete and accurate. When you sign application forms, you are claiming that they are complete to the best of your knowledge and/or misleading information. Information you give on your application will be verified by your Housing Agency. In addition, HUD may do computer matches of the income you report with various Federal, State, or private agencies to verify that it is correct.

**Beware of fraud:** You should be aware of the following fraud schemes:

1. Do not pay any money to file application
2. Do not pay any money to move up on the application list
3. Do not pay anything not covered by your lease
4. Get a receipt for any money you pay
5. Get a written explanation if you are required to pay any money other than what your contract covers

**Recertifications:** You must provide updated information at least once a year. Some programs require that you report any changes in income or family composition immediately. You must report on recertification forms all income changes, such as, pay increases or benefits, change of job, loss of benefits for all family members. You must also report any family member who has moved in or out.

I understand that use of a photocopy of this release may be necessary to verify one or more of my references. I authorize that use and request that such a copy be honored fully, as if it were an original. I understand that a photocopy of this form will also serve as authorization.

I have read and understand this bulletin:

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date