



## Youth Development Fund Program Application

**FOR OFFICAL USE**

Date Submitted: \_\_\_\_\_

Time Submitted: \_\_\_\_\_

Received by: \_\_\_\_\_

Application #: \_\_\_\_\_

Applicant Parent's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Child's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Parent's Bay Mills I.D. # \_\_\_\_\_ Child's Bay Mills I.D. # \_\_\_\_\_

Social Security: \_\_\_\_/\_\_\_\_/\_\_\_\_ Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_ Age: \_\_\_\_\_

**HOUSEHOLD INFORMATION**

List all persons living in the household on a permanent basis. Start with the oldest. If additional space needed, please use back of page.

Name	Date of Birth	Relationship to Applicant	Tribal Affiliation

**INCOME INFORMATION**

Earned Income: Start with the applicant then spouse if applicable, the list of all permanent family members, including all who are listed under the Household Information section and have unearned income such as social security, retirement, disability, unemployment benefits, child support and alimony, royalties, per capita payments, interest etc. Provide check stubs, W-2 forms, etc., for verification.

Name	Annual Earned Income	Source of Income

Total annual earned income \$ \_\_\_\_\_

Name	Annual Unearned Income	Source of Income

**Total annual unearned income \$ \_\_\_\_\_**

**TOTAL COMBINED ANNUAL HOUSEHOLD INCOME \$ \_\_\_\_\_**

Please provide a brief summary of why you're applying for the YDFP and attach any supported documentation to the back.


By my signature below, I hereby certify that all of the foregoing information and attached documentation is true and correct. I understand that providing any false statements, false information, any misleading statements or information, or if I fail to notify Bay Mills Indian Community of changes to my household's eligibility, will be grounds for denial of the application or, if assistance has already been granted, recapture of any funds granted, and may be grounds civil or criminal prosecution if Bay Mills Indian Community determines it is appropriate to do so.

\_\_\_\_\_

Applicant Parent's Signature

**YOUTH DEVELOPMENT FUND PROGRAM APPLICATION CHECKLIST**

- W-2 and Other Income Information
- Documents Showing Youth Expenses
- Tribal ID / State ID / Federal ID

<b>OFFICIAL USE ONLY</b>
Approved: Yes/No
Reason: _____
Denial Communicated: Yes / No
Staff Signature: _____