



Ceremonial Bent Wood Hat

Sun'aq Tribe of Kodiak

Federally Recognized December, 2000

The Sun'aq Tribe of Kodiak (STK) Housing Assistance Policy and Procedure

The Sun'aq Tribe of Kodiak (STK) has received a FY 2009 Grants to Indian Tribal Governments and Sexual Assault Services Programs award from the Office on Violence Against Women to provide temporary housing assistance for victims of domestic violence, dating violence, sexual assault, or stalking and their children.

According to project's guidelines the Sun'aq Tribe of Kodiak (STK) will provide rental, security deposits and utilities payments assistance to victims who are homeless, or in need of transitional housing or other housing assistance, as a result of fleeing a situation of domestic violence, dating violence, sexual assault, or stalking.

Eligibility requirements:

1. A victim must suffer, or be in danger of suffering physical, sexual, or emotional abuse which makes her residence unsafe and forces the victim to flee.
2. A victim must be American Indian/Alaska Native and reside in the service area of the STK. Priorities are given to Sun'aq tribal members.
3. A victim must be at least 18 years of age or an emancipated minor.

Procedure of providing housing assistance:

1. The Petitioner will complete the application process to determine eligibility to receive housing assistance from the STK through this project.
2. The Project Coordinator shall review the application in a timely manner.
3. The Project Coordinator will assist the approved applicant in locating appropriate housing. Priority will be given to the Kodiak Island Housing Authority or other legal rental providers in Kodiak. The applicant will sign a rental agreement with the chosen housing provider and present a copy of this document to STK.
4. An approval letter will be send by the STK to the property owner stating terms, conditions and amount of the housing assistance payment for the approved applicant. The property owner must sign the letter agreeing on terms, conditions and amount of the payment and return the copy to the Sun'aq Tribe of Kodiak. To protect the victim's confidentially there will be no indication of the reasons for housing assistance.
5. STK will pay rental expense of up to \$ 850.00 per month for a period of three months for an approved applicant and a one-time security deposit of up to \$400.00 directly to the property owner. The remaining balance of the security deposit will be returned to the applicant by the property owner at the end of the rental agreement.

6. STK will pay approved applicant's utilities expense of up to \$300.00 total directly to the supplier / service provider. Applicants shall submit their utilities bills monthly to the Project Coordinator as soon as possible in order to process the payment in a timely manner.
7. The Project Coordinator will prepare necessarily check requests for the housing and utilities assistance. All payments and accounting practices for this project will be handled according to the Sun'aq Financial Management Policies and Procedures.
8. To protect applicants' confidentiality every employee of STK who has an access to clients' personal information under this project must sign and execute the Confidentiality Agreement.
9. In cases when related information about the STK housing assistance applicant has to be obtained or exchanged with other agencies/service providers the Release of Confidential Information Form shall be signed by the applicant.
10. Housing assistance is available until funds are depleted.



Sun'aq Tribe of Kodiak

Housing Assistance Application

Applicant Information

Applicant Name _____

Date of Birth _____

Mailing Address _____

Residence Address _____

Phone numbers and other contact information _____

Emergency Contact Name and Phone # _____

How long have you lived in the Kodiak area _____

Are you a member of the Sun'aq Tribe of Kodiak Yes / No

If you answer NO, what Tribe are you an enrolled member with _____

What tribal documentation do you have to verify your tribal status (if needed):

CIB Y / N

Tribal Enrollment Y / N

Birth Certificate Y / N

Applicant Status

Circle one: single / dating / married / divorced / separated / widowed

I have children with me who are the part of this housing assistance application:

Child's Name

Date of Birth

Sex

Important:

I have read and understand the Sun'aq Tribe of Kodiak Housing Assistance Policies and Procedures and Eligibility Requirements.

I testify that I meet all eligibility requirements for this housing assistance program.

Applicant Signature _____

Printed Name of Applicant _____

Date _____

OFFICIAL USE ONLY:

Application _____ Approved

_____ Denied

Reason for denial _____

Actions taken _____

Authorizing Official (signature) _____

Printed Name _____ Date _____



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Release of Confidential Information

I, _____,
hereby authorize the release of information requested by the Sun'aq Tribe of Kodiak. I hereby
authorize the Sun'aq Tribe of Kodiak to obtain and exchange information related to my
application to participate in the Sun'aq Tribe of Kodiak Housing Assistance Project. This release
of information shall be in effect while I'm an applicant or a recipient of the housing assistance.

Persons or organizations that may be contacted include, but not limited to:

and all departments and programs within and administrated by the Sun'aq Tribe of Kodiak.

A reproduction of this Release is valid as the original.

Applicant Signature

Printed Name of Applicant

Date