

MESCALERO APACHE TRIBE
Application for COVID-19 Economic Assistance Program

INSTRUCTIONS

1. Each eligible Tribal Member, who is a Head of Household, may receive up to \$450.00 in Economic Assistance where he or she suffered economic impacts because of the coronavirus (COVID-19) pandemic and the Tribal Member needs assistance for emergency individual needs. The Economic Assistance will be:
 - A. Provided directly to the following vendors (up to \$150.00): Mescalero Apache Telecom, Inc. (MATI) (telephone/internet), Mescalero Gas Company (propane), and the Tribal Store (food/necessities); and
 - B. In the form of payment for past due amounts and/or credit on the Tribal Member's account with any of the listed vendors.
2. Submit your application: in person at Tribal Offices; by mail to P.O. Box 227, Mescalero, NM 88340; by fax to (575) 464-9191, by email to one of the following addresses:

clester@mescaleroapachetribe.com

cmsaenz@mescaleroapachetribe.com

vfernando@mescaleroapachetribe.com

jchimal@mescaleroapachetribe.com

htissnolthtos@mescaleroapachetribe.com

Full Name of Applicant:	Tribal Census #:	Phone #:
Physical Address (include house #, city, state & zip code):		
<p>To be eligible to receive Economic Assistance you must be able to check at least one of the below statements. Please check each statement that applies.</p> <p><input type="checkbox"/> I was furloughed from my place of employment due to the COVID-19 pandemic.</p> <p><input type="checkbox"/> My pay was/hours were reduced due to the COVID-19 pandemic.</p> <p><input type="checkbox"/> I or my spouse/minor children had unforeseen medical expenses due to COVID-19.</p> <p><input type="checkbox"/> I had unforeseen funeral expenses due to the death of an immediate family member who died as a result of COVID-19.</p> <p><input type="checkbox"/> I suffered other unforeseen hardships due to COVID-19 (for example, you had to quit your job due to lack of childcare).</p>		
<p>In addition, to be eligible, you must be the Head of Household (you pay rent, utility bills, etc., your name is on the lease or deed for the home, or you are recognized by the other residents of the home as having the authority to determine who can reside in the home). Only one application for each household will be accepted. Please check here <input type="checkbox"/> if you are Head of Household for the physical address listed above.</p>		
<p>Finally, to be eligible, the Economic Assistance requested must meet emergency individual needs (for example, you risk losing service, or you do not have food to provide for your family). Please check here <input type="checkbox"/> if you have emergency individual needs that will be met by Economic Assistance.</p>		
<p>Please check/complete each line that applies:</p> <p><input type="checkbox"/> MATI – Amount to be paid (up to \$150): _____</p> <p><input type="checkbox"/> Mescalero Gas Company – Amount to be paid (up to \$150): _____</p> <p><input type="checkbox"/> Tribal Store – Amount to be paid (up to \$150): _____</p> <p>Total (Up to \$450): _____</p>		
<p>I, _____ (print your name), certify that the information contained above is true and accurate.</p> <p>Submitted by: _____ Date: _____</p> <p style="text-align: center;">Signature of Applicant</p>		

COMPLETE? YES NO BY: _____