

Comanche Nation K-12 Student Services

P.O. Box 908 Lawton, OK 73502

T: (580) 492-3278 F: (580) 492-5089 E: studentservices@comanchenation.com

Student Name: \_\_\_\_\_ Female: \_\_\_ Male: \_\_\_

Grade: \_\_\_\_\_ Comanche Tribal No. \_\_\_\_\_ Birthdate: \_\_\_\_\_

School: \_\_\_\_\_

Legal Parent/ Guardian: \_\_\_\_\_ Single Parent/Guardian? \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Did student participate last year? Yes \_\_\_ No \_\_\_ if yes, were receipt(s) returned? \_\_\_\_\_

Are there other school age children in the home? Yes \_\_\_ No \_\_\_ if yes, please list students name and grade below:

\_\_\_\_\_ Grade \_\_\_\_\_ Comanche Tribal Enrolled? \_\_\_\_\_

\_\_\_\_\_ Grade \_\_\_\_\_ Comanche Tribal Enrolled? \_\_\_\_\_

\_\_\_\_\_ Grade \_\_\_\_\_ Comanche Tribal Enrolled? \_\_\_\_\_

Please indicate a Wal-Mart gift card **OR** a clothing voucher from JC Penny, rue21 or Bookcase Uniforms:

1<sup>st</sup> Choice \_\_\_\_\_

2<sup>nd</sup> Choice \_\_\_\_\_

- ❖ Incomplete applications will not be accepted, as per guidelines.
- ❖ Purchases are to be for clothing and/or school supplies for applicant.
- ❖ Toiletries, consumable foods/drinks, gas, phones, phone/game/music cards, tablets/laptops are not permitted.
- ❖ Receipts must be returned to K-12 Student Services.

I have read and I agree to comply with the program guidelines.

\_\_\_\_\_  
Signature of Parent/Legal Guardian

\_\_\_\_\_  
Date

<b>Office Use Only</b>		
Voucher/card # _____	Issue Date _____	Staff Int. _____