



**HEIPA DISTRICT**  
**PO Box 223**  
**Veblen, SD 57270**

**District Request Form**

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

Date of Birth: \_\_\_\_\_

\_\_\_\_\_  
Full Name

\_\_\_\_\_  
(Maiden name/Name on Roster)

\_\_\_\_\_  
Current Address

\_\_\_\_\_  
Tribal Enrollment #

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Phone #

**(All information must be completed for a check to be processed.)**

**Check only one per application:**

\_\_\_\_\_ General Welfare (\$200 yearly)

\_\_\_\_\_ Youth to Adult (\$150)

\_\_\_\_\_ Funeral Assistance (\$300 designated next of kin)

\_\_\_\_\_ Senior Pictures (\$300)

\_\_\_\_\_ New Elder (55-64 \$50 / 65+ \$100)

\_\_\_\_\_ HS Diploma/GED (\$250)

\_\_\_\_\_ Elderly Living Expense (55-64 \$50)

\_\_\_\_\_ College Living Expense  
(education)

\_\_\_\_\_ Elderly Living Expense (65+ \$100)

- \*\* Living Expense must have student name, college name, phone # and student grades with school letterhead attached for verification -
- \*\* must be turned in 45 days of completion
- \*\* Youth to adult must have a copy of Tribal Enrollment, ID and Heipa District Enrollment application attached
- \*\* Must attach current documentation for Senior pictures and HS Diploma/GED (must be turned in 45 days of completion)
- \*\* New Elderly must attach copy of Tribal Enrollment, ID with birthdate
- \*\* If we must stop payment on your check due to damage, loss, etc., we will deduct \$30 bank charge to issue a new one
- \*\* Funeral Assistance will be one payment to the next of kin designated by the family. Deceased must be a district member

Any requests for early general welfare will approved for : (this will be counted as your yearly General Welfare not donation)

- \*\* Disconnect notice for electricity – check will go to the electric company
- \*\* Request for propane – check will go to propane company
- \*\* Eviction notice – check will go to landlord
- \*\* Homeless – check will go to a motel or a person you will be staying with for room and board
- \*\* Family member in intensive care unit – must be immediate family member
- \*\* Funeral for family member – go to member (individual will be required to pick up their own check, checks will not be mailed)

Signature: \_\_\_\_\_

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

Phone: 605-738-2324

Email: [heipa.district@outlook.com](mailto:heipa.district@outlook.com)

Fax: 605-738-2379