



Housing Authority of the Sac and Fox Nation

201 N. Harrison • P.O. Box 1252 • Shawnee, OK 74801 • Ph (800)831-7515 • (405)275-8200 • Fax (405)275-8203

REQUEST FOR ADDITION TO HOUSEHOLD (MINOR CHILD)

Resident: _____ Account # _____

Address: _____

I request approval for the Sac & Fox Authority to add the following individual to my household.

Full Name: _____

Relation: _____

Social Security #: _____

Place of birth: _____

Date of birth: _____

Tribal Affiliation: _____

State ID/DL #: _____ Expiration Date: _____

Attention! You must attach his/her CDIB and/or Tribal Enrollment Card if you listed a tribal affiliation. If you leave this blank or do not attach a copy of the card they **will not** be listed as Native American.

Income being received for this child: i.e. (child support) _____

Reason for addition: _____

You must attach the following documentation with this packet in order to complete your request:

Birth Certificate	Social Security Card	Tribal Enrollment
-------------------	----------------------	-------------------

Head of Household

Date

HASFN, Housing Program Specialist

Date

HASFN, Housing Manager

Date

_____ Approved _____ Disapproved