



A good mind. A good heart. A strong fire.

COMMUNITY FUND – FY 2019

Thank you for your interest in the Community Fund. Funding requests are for Oneida enrolled members and covers the following categories: 1.) Self-Development; 2.) Community Events; and 3.) Fundraising Activities; examples of what may be covered under each category are included in this packet.

The FY19 fiscal year for the Oneida Nation begins Oct 1, 2018 and ends Sept. 30, 2019. Included in this packet is Additional Information about the CF; Examples of request categories; Instructions for completing the form; and the FY19 Community Fund Request Form. The Finance Committee reviews Community Fund requests at their *first* meeting of each month. See meeting calendar below:

FY19 FINANCE COMMITTEE MEETING CALENDAR FOR REVIEW OF COMMUNITY FUND REQUESTS

Request Due Date:	Finance Committee Meeting Dates:
September 24, 2018	October 1, 2018
October 29, 2018	November 5, 2018
November 26, 2018	December 3, 2018
December 24, 2018	December 31, 2018 (for Jan.)
January 28, 2019	February 4, 2019
February 25, 2019	March 4, 2019
March 25, 2019	April 1, 2019
April 22, 2019	April 29, 2019 (for May)
May 28, 2019	June 3, 2019
June 24, 2019	July 1, 2019
July 29, 2019	August 5, 2019
August 27, 2019 (Tues.)	September 3, 2019 (Tues.)

The Finance Committee (FC) meets each month on Monday, one week prior to the regularly scheduled Business Committee meetings/dates. FC meetings are held in the Business Committee Executive Conference Room, second floor at the Norbert Hill Center @ 9:00 A.M.

Requests to the Community Fund (CF) will be reviewed by the Finance Committee once a month during their first meeting of the month. **All CF requests are due by noon on the request due dates listed above.** All incomplete requests will be sent back to the requestor. It is suggested all completed requests should be received at least six weeks before actual event to ensure a timely review and processing of the request.

NOTE: All regularly scheduled meeting dates/times/place subject to change per the Office of the Treasurer and the Finance Committee. Please call 920-869-4325 for questions or to check on specific meeting dates/times/place.

ADDITIONAL INFORMATION WHEN COMPLETING CF REQUESTS

Following is information to keep in mind when filling out requests correctly and completely. All information is required for processing your request. All incomplete requests will be sent back to requestor to complete. Please read everything to avoid any delays. If you have any other questions on meeting dates or how to complete your request you can contact Denise Vigue via e-mail at: dvigue@oneidanation.org or call 920-869-4325.

- ▶ Requests are only reviewed once each month so requestors are asked to plan ahead and submit their request at least six (6) weeks or more ahead of planned event.
 - ▶ Individual requests are limited **\$500.00** once per person each fiscal year and groups are limited to **\$750.00** once per group each fiscal year.
 - ▶ An E-mail address is **required** as all communication about your request will be conveyed to you through your E-mail.
 - ▶ Requests received without all backup information will be sent back to the requestor and item will be deferred until the next meeting. No request will be reviewed if event/activity has already occurred at the time of FC review.
 - ▶ If requestor has received a previous request in an earlier year and a required follow-up report has not received, the current request will not be reviewed in FY2019.
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EXAMPLES OF COMMUNITY FUND REQUEST CATEGORIES

1. **SELF DEVELOPMENT:** This category is for activities that promote positive physical, mental, social, and educational (non-credit) well-being of Oneida Tribal members.
 - Examples of requests include sports, music, art, or other social/educational camps for youth; class trips for youth (registration fee only); conference registration fees and or workshop fees for adults, etc.
2. **COMMUNITY EVENTS:** This category is for Oneida Community Events that are free and open to the public and encourage positive educational, and or physical activities for Oneida members and their families.
 - Examples of requests include Community social, sporting, or cultural events for the Oneida Community such as golf outings, film screenings, Youth & Elder Fishing Day, Big Apple Fest, Longhouse ceremonies, etc.
NOTE: If event is sponsored by a tribal program the request will be limited to product only.
3. **FUNDRAISING ACTIVITIES:** This category encourages Oneida Tribal members to take an active part in events that benefit their family, the youth, and the community.
 - Examples of requests include fundraising for groups such as the Oneida 4-H Club, Oneida Powwow Committee, family fundraiser for children in sports or child's class trip, etc.

NOTE: These examples are not all inclusive they are just a sample of requests that have been approved in the past.

HOW TO COMPLETE THE COMMUNITY FUND REQUEST FORM - FY 2019

1. Print name of person making the request (parents must make request for any minor children)
2. Provide complete address of person making request
3. Provide E-Mail address of person making request (all communication about your request will be conveyed to you through your e-mail)
4. Provide best contact number to reach requestor and check if home or cell phone number
5. Provide Social Security Number and Oneida Enrollment number of requestor (If request is for yourself, provide copy of enrollment)
6. Provide reason for request (i.e. gymnastics registration fees for child, Oneida fundraising event for group, fees for sports registration, etc.)
7. If request is on behalf of minor child include child's name and Oneida enrollment number (Provide copy of child(ren)'s enrollment-Required)
8. Indicate the total amount of need pertaining to request (this would be the total cost of paying for everything on your own, requested amount from the CF, and the match amount.
9. The date the funds are needed. (Please ensure your request has been submitted well before the FC review date as it does take several weeks for processing.
10. Check the category type and attach any flyers, brochures, payment schedules and budget
11. If a check is to go to a 3rd party vendor provide all information including name of business, contact person at business, phone of contact person and the complete mailing address of the business /vendor.
12. Signature of person making the request (required)

➔ Please read the notice on the bottom of the CF Request form before submitting.

Along with the request form include on a separate sheet of paper the following:

1. What other sources /organizations /agencies you have contacted regarding this request and what were the results? (All denial letters from other programs must accompany this request)
2. Fully describe the reason for this request and the benefit to the Oneida Community/members.
3. Attach receipts & provide budget of all expenses associated with this request

When completed please scan the Community Fund form & all backup and send to: CF@oneidanation.org
or mail request to: Finance Administration, Attn: Community Fund, P.O. Box 365, Oneida, WI 54155

Note: No personal information provided by a requestor will be made public without the expressed written permission of the requestor.



COMMUNITY FUND FY19 FUNDS REQUEST FORM

REQUESTOR'S NAME: _____

ADDRESS: _____
City State Zip

E-MAIL ADDRESS: _____
(REQUIRED)

BEST NUMBER FOR CONTACT: _____ CHECK ONE: HOME: _____ CELL PHONE: _____

SOCIAL SECURITY # _____ ONEIDA ENROLLMENT # _____

REASON FOR REQUEST: _____
(Briefly describe what the request is for)

CHILD'S NAME: _____ ONEIDA ENROLLMENT # _____

→ If Request is made on behalf of minor child provide name and Oneida tribal enrollment number of child (required)

TOTAL COSTS: \$ _____ REQUESTED AMT.: \$ _____ REQUESTOR AMT.: _____
(10% match required)

DATE FUNDS NEEDED: _____ TYPE OF REQUEST (check one):
COMMUNITY EVENT _____ FUND-RAISING _____ SELF-DEVELOPMENT _____

→ If Funds are to be paid to a Third Party, provide complete information here:

NAME OF VENDOR: _____ EIN # _____

CONTACT NAME: _____ CONTACT'S PHONE # _____

VENDOR ADDRESS: _____

SIGNATURE OF REQUESTOR: _____ DATE: _____
(REQUIRED)

NOTICE: No Funding request will be reviewed for any event/activity that has already occurred by request review date. The Community Fund does not supplement tribal program budgets, or cover personal, household, travel, education, or professional/work expenses to individuals. This fund also does not provide duplicate funding for service already received or could be received under another program.

For Office Use Only

Date Received: _____ Date for FC Review: _____

Year of Review: FY- _____ Quarter of Review: _____ Request Number: CF# _____

Office Follow-Up: _____