

# Elder Care Program

P.O. Box 133—Concho, OK 73022  
eldercare@cheyenneandrapaho-nsn.gov



Please direct any questions to the Concho Office:

Office hours: MON-FRI 8 am to 4 pm  
Phone (405) 422-7411 Fax (405) 422-8230  
Toll Free 1-800-247-4612 ext 27411

## 2026 YEARLY APPLICATION/CHANGE OF ADDRESS FORM FOR MONTHLY FOOD ASSISTANCE

**DUE BY THE 14TH OF THE MONTH**

In order to be eligible for food assistance, to be mailed each month, you must be an enrolled member of the Cheyenne & Arapaho Tribes and turning 55 or older during the month you apply.

**APPLICATIONS ARE PROCESSED IN THE CONCHO OFFICE**

Print Name	Always provide your CDIB #		
Date of Birth	<b>2801A</b> _____		
Spouse's Name	If <b>NEW</b> to the program, submit copy of your CDIB		
<b>We do not mail checks to jails, prisons, homeless/day centers, general delivery addresses, or hotels/motels.</b>			
Mailing Address	City	State	ZIP
Physical Address	City	State	ZIP
Phone (     )	Message Phone (     )		
Email Address			

## REMEMBER:

- ✓ **ALWAYS** keep your address updated—every time you move, as soon as you move, update with Elder Care & Enrollment! **If we don't receive your updated application by the 14<sup>th</sup> of the month, your check will go to previous address.**
- ✓ New clients to Elder Care must submit their application by the 14<sup>th</sup> of the month **BEFORE** you turn 55 years old.
- ✓ Lost, mutilated, or stolen checks will not be replaced until a 60-day waiting period has passed, at which time a new check will be issued if the previous check has not been cashed.
- ✓ Checks are valid for 90 days—no checks will be reissued.

\_\_\_\_\_  
Tribal Member Signature

\_\_\_\_\_  
Date