



NAVAJO NATION DEPARTMENT OF JUSTICE
OFFICE OF THE ATTORNEY GENERAL

ETHEL B. BRANCH
Attorney General

HEATHER CLAH
Deputy Attorney General

DEPARTMENT OF JUSTICE
INITIAL ELIGIBILITY DETERMINATION
FOR NAVAJO NATION FISCAL RECOVERY FUNDS

RFS/HK Review #: _____

Date & Time Received: _____

Date & Time of Response: _____

Entity Requesting FRF: _____

Title of Project: _____

Administrative Oversight: _____

Amount of Funding Requested: _____

Eligibility Determination:

- ☐ FRF eligible
☐ FRF ineligible
☐ Additional information requested

FRF Eligibility Category:

- ☐ (1) Public Health and Economic Impact
☐ (2) Premium Pay
☐ (3) Government Services/Lost Revenue
☐ (4) Water, Sewer, Broadband Infrastructure

U.S. Department of Treasury Reporting Expenditure Category: _____

- ☐ Missing Form
- ☐ Supporting documentation missing
- ☐ Project will not be completed by 12/31/2026
- ☐ Ineligible purpose
- ☐ Submitter failed to timely submit CARES reports
- ☐ Additional information submitted is insufficient to make a proper determination
- ☐ Expenditure Plan incomplete
- ☐ Funds will not be obligated by 12/31/2024
- ☐ Incorrect Signatory
- ☐ Inconsistent with applicable NN or federal laws

Name of DOJ Reviewer: _____

Disclaimers:

An NNDNJ Initial Eligibility Determination is based on the documents provided, which NNDNJ will assume are true, correct, and complete. Should the Project or Program change in any material way after the initial determination, the requestor must seek the advice of NNDNJ. An initial determination is limited to review of the Project or Program as it relates to whether the Project or Program is a legally allowable use – it does not serve as an opinion as to whether or not the Project or Program should be funded, nor does it serve as an opinion as to whether or not the amount requested is reasonable or accurate.

THE NAVAJO NATION
FISCAL RECOVERY FUNDS REQUEST FORM & EXPENDITURE PLAN
FOR GOVERNANCE-CERTIFIED CHAPTERS

Part 1. Identification of parties.

Governance-Certified Chapter requesting FRF: Cornfields Chapter Date prepared: 05/08/2023

Chapter's P.O. Box 478
mailing address: Ganado, Arizona 86505 phone & email: (928) 755-5912 aearle@nnchapters.org
website (if any): _____

This Form prepared by: Alfreda Earle phone/email: (928) 755-5912 aearle@nnchapters.org
Alfreda Earle, Chapter Manager (928) 755-5912 aearle@nnchapters.org
CONTACT PERSON'S name and title CONTACT PERSON'S info

Title and type of Project: Scholarship Assistance Program

Chapter President: Morgan Cleveland, Sr. phone & email: (928) 755-5912
Chapter Vice-President: Wallace James, Jr. phone & email: (928) 755-5912 wjamesjr@naataanii.org
Chapter Secretary: Sharon C. Smith phone & email: (928) 755-5912 cornfields@navajochapters.org
Chapter Treasurer: Sharon C. Smith phone & email: _____
Chapter Manager or CSC: Alfreda Earle phone & email: (928) 755-5912 aearle@nnchapters.org
DCD/Chapter ASO: Toni Mina phone & email: (928) 654-3933 tmina@nndcd.org

List types of Subcontractors or Subrecipients that will be paid with FRF (if known): Cornfields Chapter

Amount of FRF requested: 151,872.00 FRF funding period: May 08, 2023 - December 31, 2026 ☐ document attached
indicate Project starting and ending/deadline date

Part 2. Expenditure Plan details.

(a) Describe the Program(s) and/or Project(s) to be funded, including how the funds will be used, for what purposes, the location(s) to be served, and what COVID-related needs will be addressed:

This project will fund the Scholarship Assistance Program. This program will help Delegate Vince James region chapters, Kinlichee, Ganado, Cornfields, Steamboat and Jeddito to mitigate the extraordinarily high levels of hardship. The assistance will respond to the alarming growth with education hardship due to the on-going COVID-19 crisis. The Scholarship will assist student with emergency costs that arise due to COVID-19, such as tuition, food, housing and childcare. The funds will be distributed to student through the educational institution. The funds will also be used for administration cost to assist the Chapter in carrying out the program. ☐ document attached

(b) Explain how the Program or Project will benefit the Navajo Nation, Navajo communities, or the Navajo People:

The COVID-19 Pandemic has caused immeasurable economic hardships for many families. The Scholarship Assistance Program will help student with emergency costs that arise due to COVID-19 and bring some measure of relief to many students as we continue to navigate these unprecedented times. ☐ document attached

(c) A prospective timeline showing the estimated date of completion of the Project and/or each phase of the Project. Disclose any challenges that may prevent you from incurring costs for all funding by December 31, 2024 and/or fully expending funds and completing the Program(s) or Project(s) by December 31, 2026:

APPENDIX A

The project will have funds encumbered no later than December 31, 2024 and will be fully expended by December 31, 2026.

☐ document attached

(d) Identify who will be responsible for implementing the Program or Project.

Cornfields Chapter.

☐ document attached

(e) Explain who will be responsible for operations and maintenance costs for the Project once completed, and how such costs will be funded prospectively:

Students will be responsible for future educational expense. The Cornfields Chapter will not be responsible for any educational expense after the completion of the project.

☐ document attached

(f) State which of the 66 Fiscal Recovery Fund expenditure categories in the attached U.S. Department of the Treasury Appendix 1 listing the proposed Program or Project falls under, and explain the reason why:

The project is covered under Expenditure Category 3.5 Education Assistance: Other
The Scholarship will assist with emergency costs that arise due to COVID -19, such as tuition, food, housing and childcare.

☐ document attached

Part 3. Additional documents.

List here all additional supporting documents attached to this FRF Expenditure Plan (or indicate N/A):

Expenditure Categories Table indicating 2.3. Chapter Resolution.


☒ Chapter Resolution attached

Part 4. Affirmation by Funding Recipient.

Funding Recipient affirms that its receipt of Fiscal Recovery Funds and the implementation of this FRF Expenditure Plan shall be in accordance with Resolution No. CJY-41-21, the ARPA, ARPA Regulations, and with all applicable federal and Navajo Nation laws, regulations, and policies:

Chapter's
Preparer: 
signature of Preparer/CONTACT PERSON

Approved by:


signature of Chapter President or Vice-President

Approved by: 
signature of Chapter Manager or CSC

Approved by:


signature of DCD Chapter ASO

Approved to submit
for Review:


signature of DCD Director

FY_2023_

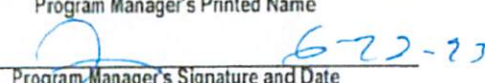
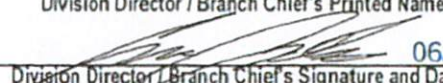
**THE NAVAJO NATION
PROGRAM BUDGET SUMMARY**

Page 1 of 1
BUDGET FORM 1

PART I. Business Unit No.: <u>New</u>		Program Title: <u>Cornfields Chapter Scholarship Assistance Program</u>		Division/Branch: <u>DCD</u>	
Prepared By: <u>Alfreda Earle</u>		Phone No.: <u>(928) 755-5912</u>		Email Address: <u>aearle@nnchapters.org</u>	

PART II. FUNDING SOURCE(S)	Fiscal Year /Term	Amount	% of Total	PART III. BUDGET SUMMARY	Fund Type Code	(A) NNC Approved Original Budget	(B) Proposed Budget	(C) Difference or Total
NN Fiscal Recovery Funds	05/08/23-12/31/26	151,872.00	100%	2001 Personnel Expenses			12,072	12,072
				3000 Travel Expenses				
				3500 Meeting Expenses				
				4000 Supplies			6,500	5,000
				5000 Lease and Rental				
				5500 Communications and Utilities			7,000	7,000
				6000 Repairs and Maintenance				
				6500 Contractual Services				
				7000 Special Transactions				
				8000 Public Assistance			126,300	127,800
				9000 Capital Outlay				
				9500 Matching Funds				
				9500 Indirect Cost				
				TOTAL		\$0.00	151,872.00	151,872

PART IV. POSITIONS AND VEHICLES	(D)	(E)
Total # of Positions Budgeted:		
Total # of Vehicles Budgeted:		

PART V. I HEREBY ACKNOWLEDGE THAT THE INFORMATION CONTAINED IN THIS BUDGET PACKAGE IS COMPLETE AND ACCURATE.	
SUBMITTED BY: <u>James Adakai, Deputy Division Director</u> Program Manager's Printed Name	APPROVED BY: <u>Calvin Castillo, Division Director</u> Division Director / Branch Chief's Printed Name
 Program Manager's Signature and Date	 Division Director / Branch Chief's Signature and Date

FY 2023

THE NAVAJO NATION
PROGRAM PERFORMANCE CRITERIAPage ___ of ___
BUDGET FORM 2

PART I. PROGRAM INFORMATION:

Business Unit No.: _____ New _____

Program Name/Title: Cornfields Chapter Scholarship Assistance Program

PART II. PLAN OF OPERATION/RESOLUTION NUMBER/PURPOSE OF PROGRAM:

PART III. PROGRAM PERFORMANCE CRITERIA:

1st QTR		2nd QTR		3rd QTR		4th QTR	
Goal	Actual	Goal	Actual	Goal	Actual	Goal	Actual

1. Goal Statement:

Provide financial hardship and bring some measure of relief to many student as we continue to navigate through these unrepresented times

Program Performance Measure/Objective:

Assist students with scholarship within Delegate James Five (5) Chapters.

				5		5	
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2. Goal Statement:

Program Performance Measure/Objective:

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3. Goal Statement:

Program Performance Measure/Objective:

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4. Goal Statement:

Program Performance Measure/Objective:

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5. Goal Statement:

Program Performance Measure/Objective:

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PART IV. I HEREBY ACKNOWLEDGE THAT THE ABOVE INFORMATION HAS BEEN THOROUGHLY REVIEWED.

James Adakai, Deputy Division Director

Program Manager's Printed Name

Program Manager's Signature and Date

Calvin Castillo, Division Director

Division Director/Branch Chief's Printed Name

Division Director/Branch Chief's Signature and Date

06/29/2023

FY __2023__

**THE NAVAJO NATION
DETAILED BUDGET AND JUSTIFICATION**

Page __ of __
BUDGET FORM 4

PART I. PROGRAM INFORMATION:				
Program Name/Title: _____		Cornfields Chapter Scholarship Program		
Business Unit No.: _____		New		
PART II. DETAILED BUDGET:				
(A)	(B)	(C)	(D)	
Object Code (LOD 6)	Object Code Description and Justification (LOD 7)	Total by DETAILED Object Code (LOD 6)	Total by MAJOR Object Code (LOD 4)	
8705	Assistance Scholarship - to assist 253 student @ \$500.00 each. Approximately 40 student per chapter (Delegate James 5 Chapters) that were affected during pandemic.	126,500	126,500	126,500
4000	Supplies			
4120	Office Supplies			
	4130 - General Office Supplies	2,500	2,500	2,500
4410	Operating Supplies			
	4420 - General Operating Supplies	2,300	3,800	3,800
	4440 - Non Cap Computer Software	1,500		
5500	Communication & Utilities			
	5530 - Basis Service	1,100	7,000	7,000
	5570 - Internet	900		
	5710 - Energy (Electric)	5,000		
2001	Personal Expense			
	2200 Salary Adj	8,320	12,072	12,072
	2900 - Fringe Benefits	3,752		
TOTAL		151,872	151,872	

FY_2023_____

THE NAVAJO NATION
LISTING OF POSITIONS AND ASSIGNMENTS BY BUSINESS UNIT

Page ____ of ____
BUDGET FORM 3

SUB ACCT	POS NO	JOB TYPE	POSITION TITLE	EMP ID	WRKSITE CODE	FY 2021 ACTUAL		FY 2022 PROPOSED	
						G/S	SALARY	HOURS	BUDGET
1001			Chapter Manager					2080	6,032.00
1001			Chapter Manager					2080	6032



CORNFIELDS CHAPTER

P.O. Box 478, Ganado, Arizona 86505 – PH# (928) 755-5912 – FAX# (928) 755-5917
Email: cornfields@navajochapters.org Website: cornfields.navajochapters.org

CF-FEB2023-008

RESOLUTION OF THE CORNFIELDS CHAPTER

Approve and Request the Navajo Nation Office of the President and Vice-President, the Naabik'iyati' Committee, Navajo Nation Council, and the Budget and Finance Committee to Support and approve Delegate Vince James Five Chapters Kinlichee, Ganado, Cornfields, Steamboat and Jeddito Chapter's Expenditure Plan for Scholarship in the amount of \$151,872.00.

WHEREAS:

1. Cornfields Chapter is a recognized as certified chapter of the Navajo Nation and is vested with the authority and responsible to plan and implement all things that are in the best interest of its community; and
2. Cornfields Chapter realize that pursuant to CAP-34-98, the Local Governance Act allows all chapters to make decisions over local matters; this authority will improve community decision making, allow communities to excel and flourish, enabling Navajo Nation leaders to lead towards a prosperous future of its community; and improve the strength and sovereignty of the Navajo Nation; and
3. Cornfields Chapter is delegated to act within its authority to review all local matters affecting the Community members consistent with Navajo Nation law, including custom and tradition with compel the Chapter to govern with responsibility and accountability to the community members; and
4. Cornfields Chapter, was made aware by Delegate Vince James to be the host for the remaining Navajo Nation Fiscal Recovery Fund Delegate Region Project Plan in the amount of \$151,972.00 for Scholarship; and
5. Cornfields Chapter, knows that the Fiscal Recovery Funds are specifically intend to respond to the COVID-19 public health emergency and its negative economic impacts including assistance to household, education, and respond to workers performing essential work during the COVID-19 public health emergency by providing hazard and premium pay to eligible workers, and make necessary investment in water, sewer, and/or broadband infrastructure and education; and
6. Pursuant to CJN-29-22 the Navajo Nation Central Government may award funding to LGA-Certified Chapters through sub-recipient agreements to implement and manage specific projects. Cornfields Chapter would like to exercise is LGA authority to receive the Navajo Nation Fiscal Recovery Fund and manage the projects: and

*Morgan Cleveland, Sr., Council President - Wallace James, Jr., Vice-President - Celeb Roanhorse, Council Sec/Treasurer
Vince R. James, Council Delegate - Alfreda Earle, Manager - Marilyn T. Begay, Office Specialist*



CORNFIELDS CHAPTER

P.O. Box 478, Ganado, Arizona 86505 – PH# (928) 755-5912 – FAX# (928) 755-5917

Email: cornfields@navajochapters.org Website: cornfields.navajochapters.org

CF-FEB2023-008

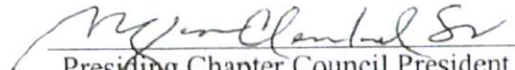
7. Cornfields Chapter believes it is in the best interest of the community and Delegate Vince James's Five Chapters, Kinlichee, Ganado, Cornfields, Steamboat and Jeddito to support and approve Delegate Vince James Region Scholarship Expenditure Plan for the benefit of all five chapters, especially during the on-going COVID-19 pandemic.

NOW THEREFORE BE IT RESOLVED THAT:

The Cornfields Chapter hereby approves to request the Navajo Nation Office of the President and Vice-President, the Naabik'iyati' Committee, Navajo Nation Council, and the Budget and Finance Committee to Support and approve Delegate Vince James Five Chapters Kinlichee, Ganado, Cornfields, Steamboat and Jeddito Chapter's Expenditure Plan for Scholarship in the amount of \$151,872.00

CERTIFICATION

I hereby certify that the Cornfields Chapter duly considered the foregoing resolution at a duly called meeting at Cornfields Chapter, Navajo Nation (ARIZONA) at which a quorum was present and was passed by a vote of 22 in favor, 00 opposed and 02 abstained on this 12th day of February 2023.


Presiding Chapter Council President
CORNFIELDS CHAPTER

Motion: Ms. Rolanda Todacheenie
Second: Ms. Desiree Taliman

*Morgan Cleveland, Sr., Council President - Wallace James, Jr., Vice-President - Celeb Roanhorse, Council Sec Treasurer
Vince R. James, Council Delegate - Alfreda Earle, Manager - Marilyn T. Begay, Office Specialist*

Cornfields Chapter Scholarship Assistance Program

The Cornfields Chapter recognizes the importance of education to our community and supports Delegate Vince James Region Chapter's (Kinlichee, Ganado, Cornfields, Steamboat and Jeddito) interested in pursuing their career or enhancing their current career path. The purpose of the Scholarship Assistance Program is to help Delegate Vince James Region Chapter to mitigate the extraordinarily high levels of hardship. The program will assist student with emergency costs that arise due to COVID-19, such as tuition, food, housing and childcare. The Cornfields Chapter Scholarship Assistance Program will award \$500.00 to eligible student. The funds will also be used for administrative cost to assist the Chapter in carrying out the program.

The application period opens when funds become available and will continue until all scholarship funds are expended.

The scholarship of \$500.00 will be paid directly to the educational institution, funds will not be paid directly to the applicant.

Who can apply?

The scholarship is for Delegate Vince James Region Chapter's; Kinlichee, Ganado, Cornfields, Steamboat and Jeddito, and enrolled in a postsecondary institution which includes universities and colleges, as well as trade and vocational schools. Applicants must be a registered voter of Delegate Vince James Region Chapters; Kinlichee, Ganado, Cornfields, Steamboat and Jeddito.

By the time the scholarship is awarded, the applicant must be admitted or accepted to a college, university, vocational and trade schools.

Eligibility Requirements:

- Must be a registered voter of Kinlichee, Ganado, Cornfields, Steamboat, and Jeddito Chapter
- Must be enrolled in a postsecondary institution.

Applicants are required to submit the following documents with their application.

- Submit application
- Acceptance letter or notification of enrollment for education
- Class Schedule
- Certificate of Indian Blood (CIB)
- Voter registration
- Copy of applicant's ID (Driver's License and Government ID)

CORNFIELDS CHAPTER

ARPA Scholarship Assistance Program

Application

DOCUMENTS TO BE SUBMITTED WITH YOUR APPLICATION

CHAPTER:

☐ Letter of Acceptance
☐ Voter Registration
☐ Copy of Social Security Card
☐ Certificate of Indian Blood (CIB)
☐ Class Schedule
☐ ID (Driver's License and Government ID)

Kinlichee _____
 Ganado _____
 Cornfields _____
 Steamboat _____
 Jeddito _____

Please fill all information that applies to your request.

SOCIAL SECURITY NO.:		CENSUS NO.:		LEGAL NAME: (Last, First, Middle)	
CURRENT Home address: City/State/Zip					TELEPHONE NO.:
PERMANENT Home address: City/State/Zip					TELEPHONE NO.:
DATE OF BIRTH:		GENDER: Male <input type="checkbox"/> Female <input type="checkbox"/>		ARE YOU A REGISTERED VOTER? Yes <input type="checkbox"/> WHICH CHAPTER? No <input type="checkbox"/>	
NAME OF PARENT(S)				MAILING ADDRESS: City/State/Zip	
HIGH SCHOOL ATTENDED: Name/City/State/Zip				MONTH/YEAR GRADUATED:	
COLLEGE CLASSIFICATION (Beyond High School Diploma): <input type="checkbox"/> University <input type="checkbox"/> College <input type="checkbox"/> Vocational School <input type="checkbox"/> Trade School					
TYPE OF DEGREE YOU WILL EARN (Circle One) Type of Degree: A.A./A.S./A.A.S. B.A./B.S. M.A./M.S. ED.D/M.D./PH.D/J.D CERTIFICATE					
COLLEGE, UNIVERSITY, OR VOCATIONAL/TRADE SCHOOL YOU WILL ATTEND: (Address)					
UNDERGRADUATE/GRADUATES/CERTIFICATION (Required Information); Major					

OFFICE USE ONLY

DATE RECEIVED:	APPROVAL DATE:	AMOUNT:	CHECK NO.:
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