

Ute Mountain Ute Member

COVID-19 Individual Needs Assessment and Impact Survey

Submit your application by email to covidapp@utemountain.org
or by fax @ 970-565-8309

PURPOSE:

This survey is to provide information to the Ute Mountain Tribal Council in order to determine how to best utilize federal COVID-19 Relief Funds (“CRF”). Under federal law, the Tribe must only use CFR funds (1) for necessary expenditures incurred due to the COVID-19 public health emergency, (2) that were not budgeted as of March 27, 2020 and (3) that are incurred from March 1, 2020 through December 30, 2020.

This survey will help the Tribe in justifying necessary support for tribal members in combating the COVID-19 crisis. CARES ACT funding cannot be a per capita payment.

1. Has your family been affected financially by the COVID19 Pandemic?

Yes No

2. Do you reside in Montezuma County, CO or San Juan County, UT?

Yes No

3. Please check all areas in which you experienced an INCREASE in financial expenses and burden directly as a result of the COVID-19 pandemic. (select all that apply)

- Job loss / loss of income (due to COVID-19)
- Job furlough / loss of income or benefits (due to COVID-19)
- Increase in food costs due to COVID-19
- Increase in supply costs due to COVID-19
- Increased travel or transportation costs due to COVID-19
- Added costs due to day care (closures and stay home orders) from COVID-19
- New expenses for job searched as a result of COVID-19
- Added costs due to telecommuting, remote contacts or remote schooling from COVID-19
- Cleaning and disinfecting costs due to COVID-19

- Medical Related travel due to COVID-19
- Medical related expenses and supplies due to COVID-19
- Increased costs to care for family due to COVID-19
- Increase in housing costs due to COVID-19
- Quarantine expense from COVID-19
- Need of assistance for making mortgage payments (due to reduced income from COVID-19 or increased expenses from COVID-19)
- Need of assistance in making utility payments (due to reduced income from COVID-19 or increased expenses from COVID-19)
- Expenses in taking care of children or other family members due to COVID-19
- Other - Write in: _____

4. Do you have internet access at home?

Yes

No

5. How is your internet connection?

Good

Bad

6. Have you been able to telework?

Yes

No

7. Were your children able to distance learn?

Yes

No

8. Do you have access to reliable running water utilities?

Yes No

9. Have you been impacted by a shortage of food supplies?

Yes No

10. Have you been impacted by a shortage or high cost of meat?

Yes No

11. Are you concerned with food safety and availability in the future?

Yes No

12. Do you and/or your family have an access to adequate Personal Protective Equipment (facial masks, gloves, hand soaps, sanitizers, cleaning disinfectant etc...)?

Yes No

13. During the COVID-19 pandemic, have you and/or your household experienced and negative effects that have overly stressed the home (i.e., excessive worry, cabin fever, sleeplessness, etc.)?

Yes No

14. How would you prioritize the following (1 – being the highest priority and 7 – being the least priority)

- ___ IHS/Dialysis
- ___ Broadband
- ___ Education
- ___ Grocery Store
- ___ Emergency Plan/future
- ___ Tribal Department Upgrades
- ___ Other _____

15. Other Impacts or Remarks

KEEP ALL RECEIPTS

Please be sure to keep all COVID-19 related receipts, statements or other documentation to prove COVID-19 expenses. The United States Treasury Department has indicated that they will audit tribes to make sure that CRF funds are used only for qualifying expenses. We want all tribal members to be in the best position possible to prove proper use of funds. CARES ACT funding cannot be a per capita payment.

Signed by Tribal Member

Date: _____

Print Name

Census Number