

\*\*\*\*\* **Announcement** \*\*\*\*\*

**Sac and Fox Nation COVID-19 Vaccination Incentive**

**Voluntary Vaccination Incentive Option**

**Sac and Fox Nation Voluntary Vaccination Incentive Policy**

The Sac and Fox Nation (SFN) is implementing a voluntary vaccination policy effective September 30, 2021 regarding COVID vaccination(s) for SFN Tribal Members and SFN employees. In accordance with SFN's duty to provide and maintain a workplace / Tribal community that is free of COVID, we strongly encourage SFN Tribal Members and SFN employees to receive this vaccination to minimize the risk of COVID in our workplace and Tribal community. In making this decision, the Business Committee reviewed recommendations from the Centers for Disease Control and Prevention, the Advisory Committee on Immunization Practices and local health officials, Indian Health Services and our Tribal health system.

SFN Tribal employees and SFN Tribal Members may obtain the vaccination wherever they choose; however, our health system is facilitating vaccinations through ***Black Hawk Health Center, 356110 E 930 Road, Stroud, OK 74079 call 918/968-9531 for appointments.*** Vaccinations are free to Tribal employees and Tribal Members. In order to encourage Tribal Members and Tribal employees to get COVID vaccinations, the Sac and Fox Nation will pay the following incentive amount for time spent receiving the vaccines and potential time off from the vaccination effects.

***Vaccinations must be fully completed by December 30, 2021***

***Proof of second dose of Moderna or Pfizer***

***OR one dose of Johnson and Johnson***

<b><u>Covid Full Vaccination</u></b>	<b><u>Vaccine Incentive Amount</u></b>
Sac and Fox Nation Tribal Member	\$500.00
Sac and Fox Nation Employee	\$500.00

- ***Visual Proof of COVID-19 Vaccination Record is REQUIRED for Incentive Pay***

Should you have any questions regarding this new policy, please contact Angela Warrior at 918/968-3526 extension 2001.

Email COVID-19 Vaccination forms to: **[sfnrap@sacandfoxnation-nsn.gov](mailto:sfnrap@sacandfoxnation-nsn.gov)**



**Sac and Fox Nation**  
Tribal Member and Tribal Employee  
2021 COVID-19 Vaccination Incentive Application

I, \_\_\_\_\_, do hereby voluntarily show the Sac and Fox Nation my COVID-19 Vaccination Card for the purpose of applying for the Incentive Payment in the amount of \$500.00.

**Vaccinations must be fully completed by December 30, 2021**

Sac and Fox Nation Employee

**OR**

**Sac and Fox Nation Tribal member – complete below:**

Signature	Sac and Fox Roll #
Street Address	Phone
City, State	Date
Zip Code	

\*\*\*COPIES OF VACCINATION CARDS RECEIVED WILL BE SHREDDED AFTER VERIFICATION\*\*\*

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\*\*\*\*\*SAC AND FOX NATION USE ONLY BELOW THIS LINE\*\*\*\*\*

Visually viewed the COVID-19 Vaccination Card for Individual Above

Staff signature for verification of Vaccine Card	Date
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