



12D FUND APPLICATION

Pursuant to the Indian Gaming Regulatory Act of 1988, the San Carlos Apache Tribe and the State of Arizona entered into a compact agreement for the purposes of governing all Class III gaming activities conducted within the territorial jurisdiction of the Tribe. In accordance with Arizona Tribal-State Gaming Compact under Section 12 D the San Carlos Apache Tribe shall make 12% of its total contribution in either or both of the following forms:

- (1) Distributions to cities, towns or counties for government services that benefit the general public, including public safety, mitigation of impact of gaming, or promotion of commerce and economic development;
- (2) Deposits to the Commerce or Economic Development Commission Local Communities Funds established by A.R.S. 41-1505.12 (www.az.gaming.gov).

The Apache Gold Casino Resort elected to meet section 12D requirements by distribution of funds thru the cities, towns, or counties for government services. As a result an application and review selection process was created for the parties who are interested in potentially be awarded 12D funds. We thank you in advance for your interest and request that you take note of the qualifiers listed in section 1 above prior to completing your application.

The application deadline is October 11, 2015 and selections will be made shortly thereafter. The application packet is following, please feel free to attach additional information that you feel will help us better understand your cause.



12D Fund Request Application

Deadline for Applications is October 11, 2015

Entity requesting funds: Gila Community College

Please check Type of Entity	City	County X	Economic Development
P. O. Box 2656 Address	Globe City	Arizona State	85501 Zip Code
Dr. Stephen Cullen Contact Person	Senior Dean Title	928 425-8481 Phone	
8274 Six Shooter Canyon Road Address of Contact Person	Globe City	Arizona State	85501 Zip Code

Scope of Project/Request:
Training medical assisting, phlebotomy, and nursing students

Amount Requested \$5560.00	Time Frame: From (Use of funds)	1/2016-12/2020
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Possible beneficiaries of funds requested:

The beneficiaries will be students ages 18 to 60 who aspire to enter the health care profession, ie., medical assisting, phlebotomy, and nursing.

Narrative and description of project/request

The funding requested will be used to purchase eight (8) advanced Venipuncture and Injection Training Arms. The instructor utilizes the arms for the purpose of demonstration and student practice. The training arms provide complete venous access for IV therapy and phlebotomy. It also sites for intramuscular and intradermal in injections. It features 8-line vascular system, which allows students to practice venipuncture at all primary and secondary locations (Please note the attached). Following the demonstration by the instructor, student practice giving shots and techniques for blood draws. Eight training arms are requested at a cost of \$695.00 each. The total request is in the amount of \$5560.



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Identification of mechanism for reporting on use of funds (recommended at quarterly intervals).

Eight (8) training arms will be purchased at a total cost of \$5560. The proposed mechanism for reporting is to provide the number of students who have successfully completed the training in the areas of phlebotomy, medical assisting, and nursing. Final grades are recorded by each instructor at the completion of the training. Ninety students will be trained each for a total of 360 trained health care professionals over the course of this grant.

Additional comments (if more space is needed, please attach additional sheets to application).

The training outlined in this application is critical for allied health care training due to the increasing demand for health care professionals and this training needed to keep pace with this demand. A full description of the equipment requested is included with this application.

Signature of Contact Person

Date

Signature of City, Town or County Official supporting the application must be provided here for application to be complete (Examples: Mayor, Vice-Mayor, Council, Supervisor, Treasurer or Town Manager):

Signature City, Town or County Official

Title

Date

Please submit to:
General Manager
Apache Gold Casino Resort
P.O. Box 1210
San Carlos, AZ 85550
Phone: (928) 475-7800 Ext.3261

and

Tribal Secretary
San Carlos Apache Tribe
P.O. Box 0
San Carlos, AZ 85550
Phone: (928) 475-2361

Fax: (928) 475-7692

Fax: (928) 475-2567