

RESOLUTION NO. 49-15

COUNCIL OF THE CHEROKEE NATION

**A RESOLUTION AUTHORIZING THE SUBMISSION OF A GRANT APPLICATION
FOR THE SPECIAL DIABETES PROGRAM FOR INDIANS
COMMUNITY-DIRECTED GRANT PROGRAM**

WHEREAS, the Cherokee Nation since time immemorial has exercised the sovereign rights of self-government in behalf of the Cherokee people;

WHEREAS, the Cherokee Nation is a federally recognized Indian Nation with a historic and continual government to government relationship with the United States of America;

WHEREAS, the Cherokee Nation has been a grant recipient of the Special Diabetes Program for Indians (SDPI) Grant Program since its inception in 1997;

WHEREAS, the Cherokee Nation Diabetes Program has utilized SDPI funding to provide a wide range of services, staffing, equipment, and supplies for the prevention and treatment of diabetes for the past eighteen (18) years;

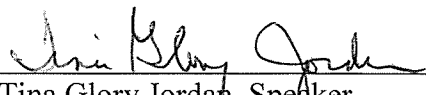
WHEREAS, thousands of patients at Cherokee Nation health facilities and citizens in Cherokee communities and schools have benefitted as a result of the SDPI Grant Program;

WHEREAS, SDPI Community-Directed Grant Programs funds for FY2016 will be awarded through a competitive grant process;

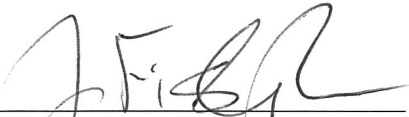
BE IT RESOLVED BY THE CHEROKEE NATION, that the Tribal Council hereby authorizes the Cherokee Nation Diabetes Program to submit a grant application to the Indian Health Service for the Special Diabetes Program for Indians Community-Directed Grant Program, and that the Principal Chief (or his designee) shall be authorized to negotiate and execute all official documents in this regard.

CERTIFICATION

The foregoing resolution was adopted by the Council of the Cherokee Nation at a duly called meeting on the 10th day of August, 2015, having 17 members present, constituting a quorum, by the vote of 17 yea; 0 nay; 0 abstaining.

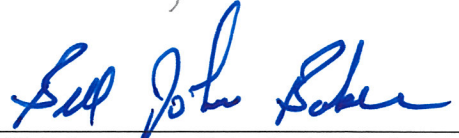

Tina Glory Jordan, Speaker
Council of the Cherokee Nation

ATTEST:




Jodie Fishinghawk, Secretary
Council of the Cherokee Nation

Approved and signed by the Principal Chief this 17 day of August, 2015.



Bill John Baker, Principal Chief
Cherokee Nation

ATTEST:



Chuck Hoskin, Jr., Secretary of State
Cherokee Nation

**ADMINISTRATIVE
CLEARANCE**

Health/ Diabetes Program

Teresa L. Chaudoin

7/17/15

Signature/Initial

Date

Executive Director:

Roger C. Montgomery

7/17/15

Signature/Initial

Date

**Treasurer: (Required:
Grants/Contracts/Budgets)**

ALC

7/17/15

Signature/Initial

Date

Government Resources:

Signature/Initial

Date

Administration Approval:

Bill John Fisher

Signature/Initial

Date

LEGISLATIVE CLEARANCE:

Legal & Legislative Coordinator:

Burton

7/30/15

Signature/Initial

Date

Standing Committee & Date:

Health 8/10/15

Chairperson:

Fullbright

Signature/Initial

Date

Returned to Presenter:

Date

**Cherokee Nation
Act/Resolution Proposal Form**

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Act

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Resolution

TITLE:

DEPARTMENT CONTACT: Teresa L. Chaudoin

RESOLUTION PRESENTER: Roger C. Montgomery, MD

COUNCIL SPONSOR: Frankie Hargis

NARRATIVE:

The purpose of the resolution is for Council authorization for the Cherokee Nation Diabetes Program to submit an application to the Indian Health Service for the FY2016 Special Diabetes Program for Indians Community-Directed Grant Program. We have received SDPI funding for treatment and prevention of diabetes since the inception of SDPI in 1997 and are currently funded at \$6.1M/ year.

This year the application will be a competitive process rather than a non-competitive continuation application. We are required to have a resolution from the Council in order to apply for the grant.

Cherokee Nation Health Services Group
Executive Director's Office

Connie C. Davis



TO: Bill John Baker, Joe Crittenden, Rick Kelly, Charles Grim,
Rhonda Cochran, C.N. Health Services Group

FROM: Connie C. Davis, Executive Director, Health Services *Connie Davis*

Date: July 17, 2015

SUBJECT: Delegation of Authority

I will be out of the office on Friday, July 17, 2015. During my absence, Dr. Roger Montgomery, Executive Medical Director will be in charge of the Executive Director's Office and will have full signature authority.

Please continue routing all documents through Ida Webber, Administrative Officer, Health Services Administration. Should you have any questions, please contact Ida at (918) 453-5447.

Thank you.