CONFEDERATED TRIBES OF 1855

Warm Springs, OR 97761 Phone: 541-553-1161

Fax: 541-553-1924

Johnson O'Malley Program 2022-2023 Enrollment Application

In order for your student to receive Johnson O'Malley (JOM) Supplemental Educational Assistance, your child must be enrolled in the program. Please make sure that all the information is filled out completely so we can better serve your child.

Eligibility Requirements:

| 1. Member of a Federally Recognized Tribe. | 2. Enrolled and Attending in a 509J or Wasco County School (Pre- $K-12$). |
|---|--|
| Any student that 3 years of age (by December 3 | 1) through grade 12 and $rac{1}{4}$ Indian blood and recognized by Secretary of the |
| Interior as being eligible for Bureau services (27: | 3.12 eligible students). |

| | All HS-12 Student Name in your household | Age | DOB | Grade | School | Tribe/s | Enroll# |
|----------|--|----------|-------------------|---------------------------------------|-----------------------|---------|---------|
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| Pare | nt/Guardian Name (print): | | | | | | |
| PO E | | | | · · · · · · · · · · · · · · · · · · · | <i>i</i> | | |
| Ema | il address: | | | P | hone: | | |
| re v | ou available to serve on the J | OM Par | ent/Officer Com | х. | | MAYBE | |
| | write any other comments | | | | | | |
| ieasi | e write any other comments | or sugg | estions regarding | g your ch | nd's educational need | 15: | |
| horob | y give authority to the JOM Officers | to vor!£ | , | | .i | | T. |

JOM Program Eligibility.

JOM Contact: June Smith

Participant Eligibility verified by IEC Officers:

Parent/Guardian Signature:

Phone: 541-553-2323

Jtwin2430@gmail.com

JOM Secretary: Carroll Dick, Higher Education

Phone: 541-553-3311 Fax: 541-553-2203

carroll.dick@wstribes.org

Survey on back side

Johnson O'Malley (JOM) Program Needs Assessment Survey

FY: 2022-2023

IEC: Confederated Tribes of Warm Springs (Indian Education Committee)

Please fill out the information below to help us identify the needs of our Native Students

| | | lementary | child or children need to be successful in school. Secondary | | | |
|--------------------------------|---|-------------------------------|---|--|--|--|
| b | Cultural Programs | | | | | |
| | Math/Science Improvement | | | | | |
| d | Reading/Language Improvement | | | | | |
| e | School Supplies | | | | | |
| f | Career Counseling or Higher Education Orientation | | | | | |
| g | Educational Supp | 8 | | | | |
| h | Other Suggestions | s: | | | | |
| Please R | ANK your three (3) m | ost important need | ds (MARKED ABOVE): | | | |
| | | | | | | |
| _ | Rank | EXAMPLE | | | | |
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| How do activities | you think JOM fund ? | B E | enable Native Student to equally participate in | | | |
| How do activities | you think JOM fund? | ls can be used to e | enable Native Student to equally participate in | | | |

2022-2023 Johnson O'Malley - Family Requesting Financial Assistance Today's Date: __ Have you completed the JOM Enrollment Form? YES NO Have you completed the JOM Needs Assessment Survey? YES NO Please complete if you have answered no. REQUEST: Attach Supporting Documents such as: Flyer, roster, schedule, cost/budget, letter of request, receipts Cost due Grade School 509-J event 2022 Fall Student Cost Other Information example: date Fees for, event date, etc. Name Football \$ □Yes □no Soccer □Yes □no \$ Volleyball \$ □Yes □no Cross Country \$ □Yes □no Other? Band □Yes □no \$ Type of Instrument Other? PE □Yes □no \$ Other Club \$ □Yes □no Cost due Other Information 2023 Winter Cost date Basketball □Yes □no \$ Swimming □Yes □no \$ Wrestling \$ □Yes □no \$ Other □Yes □no Other □Yes □no \$ Cost due 2023 Spring Cost Other Information date Baseball □Yes □no \$ Softball □Yes □no \$ Tennis \$ □Yes □no Track & Field □Yes □no \$ Other \$ □Yes □no Other \$ □Yes □no Other □Yes □no \$ Cost due 2023 Summer Cost Other Information date □Yes □no \$ □Yes □no \$ PARENT INFORMATION: Parent/Legal Guardian Name

| | raient/Legal Guardian Name | | | | |
|---|----------------------------|-------------|-------------|--|--|
| Mailing Address: PO Box Warm Springs, OR | | | - | | |
| | ─ Cell Phone: | Work phone: | Home phone: | | |
| | Email address: | | | | |
| Signing this document parent agrees to use the funds for the intended purpose. If funds not used, you must return the payment to Higher Education or risk suspension from receiving JOM services. | | | | | |
| Paren | t Signature: | 3 | | | |

2022 Fall

(September-December)

EXTRA CURRICULAR ACTIVITIES Funds for the

Jefferson County 509J & Wasco County Students

2022 Fall Allowance

Grades Pre. K-5th \$100.00

Grades 6th - 8th \$150.00

Grades 9th - 12th \$200.00

Complete & Submit

2022-2023 JOM Enrollment Application, Survey, Financial Request and attach supporting documents

(Flyer, Roster, Schedule, Receipts, ETC.)

More Questions

June Smith, Chairperson Phone 541.553.2323 Jtwin2430@gmail.com

Submit application to

Higher Education
1110 Wasco Street, Fax 541-553-2203 or email to
carroll.dick.@wstribes.org