

Johnson O'Malley Program 2023-2024 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 <u>filled out completely</u> so we can better serve your child.

Eligibility Requirements:

(1) an enrolled member of a Federally recognized Tribe, or (2) has a link to a Tribal member (through descendancy) that is within a certain proximity, meaning the student has a least one parent or grandparent (living or deceased) who is a member of a federally recognized Tribe.

	All HS-12 Student Name in your household	Age	DOB	Grade	School	Tribe/s	Enroll #
1							
2							
3							
4							
5							
6							
7							
8							
9							
10							

Parent /Guardian Name (Print):	
Mailing Address: PO BOX	
Phone number:	
Email address:	
□ Yes □No □Maybe	Are you available to serve on the JOM Parent/Officer Committee?
Additional Comments/Suggestions	

I hereby given authority to the JOM Officers to verify my child's enrollment by receiving a copy of the Certificate Degree of Indian Blood or purpose of JOM Program Eligibility.

Parent/Guardian Signature: ____

_ Date: ___

Participant Eligibility verified by IEC Officers: _____

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

E-Mail: Jom@wstribes.org

Arlissa White, Chairman Krysta Rhoan, Secretary Celeste White, Member Naomi Brisbois, Vice-Chairman Tashina Smith, Communications Officer Martha Alvarez, Member

www.warmsprings-nsn.gov

Johnson O'Malley (JOM) Program **Needs Assessment Survey**

FY: 2023-2024

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

- 1. Place a check mark next to the area(s) that your child or children need to be successful in school.
 - a. _____ Tutoring: Elementary _____ Secondary _____
 - b. _____ Cultural Programs
 - c. _____ Math/Science Improvement
 - d. _____ Reading/Language Improvement
 - e. _____ School Supplies
 - f. _____ Career Counseling or Higher Education Orientation
 - g. _____ Educational Support (list: ______
 - h. ____ Other Suggestions: _____
- 2. Please RANK your three (3) most important needs (MARKED ABOVE):

	Rank	EXAMPLE
1		С
2		В
3		E

3. How do you think JOM funds can be used to enable Native Student to equally participate in school activities?

Please check the category/categories that best describes you:

Parent/Guardian Student Other:

Thank you for your input.

