



Kickapoo Tribe of Oklahoma

Johnson O'Malley Program Enrollment Form

The Johnson O'Malley Program provides school supplies, art supplies, cultural activities and educational enrichment.

The following are Required Documents that **must** be on file for each student:

1. A completed application for 2016-2017 academic school year.
2. Copy of **updated CDIB card or enrollment verification** from State/Federally Recognized Tribe.
3. Bottom portion of application must be signed by **any school official**, which has access to student enrollment, for proof of enrollment.

WHAT IS THE JOHNSON O'MALLEY PROGRAM ACT?

An act implemented in 1934 that ensures that Native American children receive the educational opportunities that would not otherwise be provided. It is a **supplementary** program that provides specialized educational needs of Native American Students attending public schools.

A student's eligibility for JOM is based on Subpart B 273-12 as amended by Public Law 99-228.

DESCRIPTION OF EDUCATIONAL SUPPORT

Educational support funds are for purchasing necessary items for a student involved in an academic or school-related activity. Educational support funds cannot be used to supplant other services available through federal programs and state monies.

Students requesting educational support services must submit a JOM Educational Support Application with Coach/Instructor signature **to the JOM Office**. The Educational Support Application can be found on the KTO Website or at the Kickapoo Education/JOM Office.

EDUCATIONAL SUPPORT GUIDELINES

- Only items approved by the IEC's (Indian Education Committee) and JOM office may be purchased. ***Reimbursements will be made for approved items included in the approved educational support list.***
- Eligible items are those required for school participation. A narrative description of items requested must be included with the application.
- All educational support funds will be paid and accounted for by the JOM coordinator.
- An itemized voucher or invoice, purchase order or copies of actual receipts must be used as documentation of purchase.
- ***No cash payment will be made to any parent or student.***
- Schools are required to furnish certain items for students. Any item that the school furnishes to other students as part of their school policy will not be an eligible item for JOM funds.
- All items purchased with educational support funds become the property of the student for whom it was purchased, except for lease-purchase/loan items such as band instruments and graphing calculators.

ALL INFORMATION WILL REMAIN CONFIDENTIAL



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Student Information:

Student Name:		Grade:	DOB:
Gender (circle one): Male Female	Tribe:	T-Shirt Size (circle one): Youth or Adult XS S M L XL 2XL 3XL	

Other Students Enrolled in School:

Name	Age	Grade	School Attending

Parent(s)/Guardian(s) Information:

NAME OF PARENT(S)/GUARDIAN(S):		
Mailing Address:		
Phone:	Cell:	Email:

Services Requested for my student:

- Supplies/Supply Pack
 Book Fair
 Activity Fee
 Field Trips

I give permission to the KTO JOM Program to use my child's photo/video in presentation materials designed for publicity purpose and hereby release the Kickapoo Tribe of Oklahoma of any responsibility or obligation.

Parent/Guardian Signature

Date

This section is to be completed by school official:

2016-2017 Academic School Year

In attendance **or** Pre-Enrolled

Official signature below verifies the school information above to be true and correct.

School Official Signature & Title

Date

SCHOOL SEAL



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NEEDS ASSESSMENT FORM

Needs Assessment Surveys are beneficial to Indian Education and is used in determining the needs of all eligible JOM students.

- ❖ Looking at the list, please choose and rank those needs from the highest (1) to lowest (3) by circling the appropriate number.
- ❖ For instance, if you feel the tutorial/aids should be very important, then you would circle #1.
- ❖ Under "other", please write in any need that you feel should be included which is not listed below.

NEEDS	Very Important	Important	Least Important
Tutorial/Aides	1	2	3
School Supplies	1	2	3
Prevention Programs	1	2	3
Cultural Enrichment	1	2	3
Academic Needs (math, reading, etc)	1	2	3
Special Needs (Test fees)	1	2	3
Career Counseling	1	2	3
Other: _____ Item Heading	1	2	3

Please check the category that best describes you: Student Parent/Guardian Other _____

Name: _____ **Address:** _____

Phone: _____