Johnson O’Malley Program - Application & Instructions

Please read this page before completing the application. A parent/guardian must complete this application if they need support for their child in school such as but not limited to academic support, cultural actives, family engagement activities, and other family services or supports.

Eligibility Requirements:
- Enrolled member of a federally recognized tribe or Alaskan Native or is a documented ¼ blood of Native American
- Between the grade K through 12th
- Living within the defined service delivery area (FNSBSD)

JOM application must be submitted once per school year. The application will be reviewed when all required information on the following list is received.

PARENT/GUARDIAN PLEASE INITIAL BELOW FOR EACH COMPLETED PART OF THE APPLICATION PROCESS. YOUR APPLICATION WILL NOT BE COMPLETE WITHOUT YOUR INITIALS.

<table>
<thead>
<tr>
<th>Documents</th>
<th>Parent Initials</th>
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<tbody>
<tr>
<td>Johnson O’Malley Application</td>
<td></td>
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<tr>
<td>Verification-federally recognized tribe or Alaskan Native/Eskimo Enrollment</td>
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Return completed applications to any of the following:

Personal Delivery: Fairbanks Native Association
Johnson O’Malley Program
714 4th Ave., Suite 302B
Fairbanks, AK 99701

Mail: Fairbanks Native Association
Johnson O’Malley Program
3830 S. Cushman St
Fairbanks, AK 99701

Email: jom@fairbanksnative.org

If you have any questions, please contact 907-452-1648 Ext. 6403
Fairbanks Native Association
JOM PROGRAM APPLICATION

Student Information

<table>
<thead>
<tr>
<th>Student Name: ___________________________</th>
<th>Date of Birth: ___________________________</th>
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<tbody>
<tr>
<td>Parent/Guardian Name and Address:</td>
<td>Phone Number: ___________________________</td>
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<tr>
<td></td>
<td>School: _________________________________</td>
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<tr>
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<td>Grade: ______</td>
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<tr>
<td>Parent/Guardian Email Address:</td>
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Release of Information

I, as the parent or legal guardian, of the above-mentioned student do hereby authorize the release of any and all information regarding my student’s file as it relates to the eligibility/application for assistance from Fairbanks Native Association, for the period of the current Academic year only.

This authorization includes access to the above-mentioned student’s PowerSchool records including but not limited the following items listed here:

- School Registration/Attendance Verification
- Grade Reports
- Transcripts
- Graduation Progress
- Current Individualized Educational Plan (IEP) and Related Progress Reports
- Directory Information
- Demographic Information

The information listed above is permitted to be released to Fairbanks Native Association Johnson O’Malley Program.

Signature of Parent: ___________________________ Date: ______________
TRIBAL ENROLLMENT VERIFICATION FORM

Submit copy of Tribal Identification Card, if available.

Name of Applicant: ____________________________________________________________

Tribal Affiliation: __________________________________________________________

Date of Birth: __________________ Roll Number, if known: ________________________

__________________________________________________________________________

Student/Parent/Guardian Signature ___________________________ Date _________

______________________________________________________________

<<<<<Office Use Only Below this Line >>>>>

The student indicated on this form ___is / ___is not an enrolled tribal member. Their tribal enrollment number is _________.

______________________________________________________________

JOM Staff Signature ___________________________ Date _________________