

**Johnson-O'Malley Indian Student Eligibility
STUDENT CERTIFICATION**

Student Eligibility Statement: Indian students, age 3 years through grade(s) 12, shall be eligible for JOM benefits provided by a contract pursuant to this part, if they are $\frac{1}{4}$ or more degree Indian blood or a member of a federally recognized Indian Tribe. Indian students enrolled in sectarian or Bureau of Indian Education operated school is ineligible. 25 CFR, Education Contracts under JOM Act, §273.12 A copy (attach a copy to this form) of the students Certificate of Indian Blood (CIB) or Letter of Enrollment from the Tribe is required to determine eligibility.

STUDENT INFORMATION (Please PRINT CLEARLY)

Student Name: _____
First Middle Last

Home Address: _____
Street or P.O. Box Town State Zip Code

DOB: ____/____/____ **Age:** ____ **Grade Level:** ____
MM DD YEAR

School Name: _____

School Address: _____

Name of Tribal Membership: _____

Degree of Indian Blood: _____

PARENT / LEGAL GUARDIAN INFORMATION

Parent/ Legal Guardian Name: _____

Home Address (if different from student): _____

☐ Check here if the parent/legal guardian's home address is the same as this student listed above.

Telephone: _____

Parent/Guardian Signature: _____ **Date:** _____

My signature certifies that all of the statements made in this application about my child are true and correct and made in good faith. (Signature of student if 18 years old)

THE JOM INDIAN EDUCATION COMMITTEE (IEC)

The following information is to be completed by the school's JOM official

IEC Member Name & Title: _____

IEC Member Signature: _____ **Date:** _____

My signature certifies that the student information provided on this form is: (1) correct; and (2) a copy of the student's CIB or a letter of enrollment from the Tribe is attached to this form; and (3) the above named student meets the Bureau of Indian Education's JOM student eligibility criteria for program services.