



***K-12 Tribal Education***  
***Saginaw Chippewa Tribe of Michigan***  
 7444 E. Broadway Mount Pleasant, Michigan 48858  
 Youth Leadership Manager: Deb Smith 989-775-4071  
**JOHNSON O'MALLEY**  
 STUDENT ENROLLMENT FORM

<b>Student Information</b>	<b>School Information</b>
Name: _____  Address: _____ _____  Date of Birth: _____  Social Security #: _____	Name of School:  _____  _____  Grade: _____
<b>Parent\Guardian Information</b>	<b>Tribal Information</b>
Name: _____  Address: _____  If different From student: _____  Telephone # (home): _____  Telephone# (work): _____	Name of Tribe: _____  Address: _____ _____  Blood Quantum of Student: _____  Tribal ID #: _____

**Parents ~ Please complete all portions of this form ~ Miigwech!**

I hereby enroll my child in The Saginaw Chippewa Tribal Education Department Johnson O'Malley Program.