

CLAREMORE PUBLIC SCHOOLS

JOHNSON O'MALLEY PROGRAM (JOM) STUDENT ENROLLMENT FORM 2021-2022

To be completed only if the student is Native American

Date: _____

Name of Child: _____
(As shown on school enrollment records)

DOCUMENTATION REQUIRED

In order to enroll in the Johnson O'Malley program attach a copy of the Child's CDIB card (front and back of the card) and, if Cherokee, a copy of the Child's blue card. We cannot enroll your child without the card(s).

I do not have a copy of my child's card ____ (do not complete the rest of the form-your child does not qualify for the program)

I have attached a copy of my child's card ____ (continue enrollment form)

Address: _____

Telephone Number: _____ Age: ____ Date of Birth: _____

Email Address: _____ (to receive information about JOM programs)

School Attending: _____ Grade: _____

Name of Parent/Legal Guardian: _____

Name of Tribe, Band or Group: _____ Degree of Indian Blood: _____

(Office Use Only)

CDIB Card # _____
Date of approval by Cherokee Nation _____
Johnson O'Malley Student Enrollment # _____
Special Comments _____

Mail enrollment form to:
Claremore Public Schools-JOM Program
101 W. 11th Street
Claremore, OK 74017