

Education Department 23701 South 655 Road Grove, Oklahoma 74344 I P: 918-787-5452 Ext: 6041 I F: 918-787-6804 | Email: hrandall@sctribe.com

## Johnson O'Malley Program FY'2023 2023-2024 School Year Pre-K --- 12<sup>th</sup> Grade

Plea	se Print:					
Stud	lent Name:		Phone:			
Com	plete Mailing Address:					
Date	e of Birth	Age:	Grade:	Roll#:		
Ema	il Address:					
Pare	nt or Guardian Name:					
Nam	ne of School					
ADI	ORESS:					
Depa	and further tribal services and will tigate my case if questions or configure my permiss rement. This shall include, but E FOLLOWING DOCUME LICATION:	oncerns arise.  ion for the <b>relea</b> limited to, enrol	ase of informatellment status, st	tion to the Seneca- udent classificatio	-Cayuga Nation E n, and enrolled.	ducation
APP	LICATION:					
	Parent and/or Legal Guardian tribal card if not tribal then a copy of Driver's License.  Proof of Enrollment (School Letterhead signed and dated by the school and make sure the child me, date of Birth, grade, school year, and Parent/Guardian name of who the child resides with along e address.)					
5.	MUST LIVE WITHIN 50 MILE RADIUS OF GROVE TRIBAL COMPLEX					
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	Signature of Parent or Le	gal Guardian	 I	Date		
EOD	OFFICIAL LISE ONLY					

Date Action Taken: \_\_\_\_\_ Approved: \_\_\_\_ Denied: \_\_\_\_

Reason of Denial: