

**JOHNSON O'MALLEY (JOM) PROGRAM
RELEASE OF INFORMATION**

To all parents/guardians: We request your assistance in helping us to better serve your child/ren by allowing the Johnson O'Malley Indian Education Committee (JOM IEC) to have access to relevant school-related information that is necessary to the successful implementation of the JOM Program.

Student Name: _____

D.O.B: ____/____/____ Grade: _____ Age: _____ Male: _____ Female: _____
MM DD YY

Tribal Affiliation: _____ Tribal Enrollment #: _____

School District: _____ School Name: _____

Parent/Guardian Name: _____

Phone Number: _____ Email Address: _____

Mailing Address: _____ City: _____ State: ____ Zip: _____

Physical Address: _____ City: _____ State: ____ Zip: _____

Because of privacy concerns, information shared by Norfolk Public Schools and Battle Creek Public Schools including all of Madison County Public Schools with the JOM IEC will be specifically in the form of data and will not reference any particular student(s).

Purpose: The sole intent of the JOM Program is to better serve our students and address their unmet needs. The information received will be used to evaluate those needs and will also be used when re-applying for the grant and in annual reporting.

Timeframe: This permission is relevant to the 20_____ school year only and will expire when the school year ends which includes summer session if summer school is a consideration for the student.

My signature below notes my acceptance of the information sharing between my school and the JOM Indian Education Committee.

Please check one: Client Guardian Parent Legal Custody

Print name

Signature

Date

If you are not interested in having your child/ren participate in the Johnson O'Malley Program, please check box below and sign and date.

I am not interested and do not wish to have my child participant in this program.

Signature

Date

Please contact Aubrey Knudsen with any questions #402-371-8834 aknudsen@poncatribe-ne.gov