



JOHNSON O'MALLEY (PTIO JOM) Reimbursement Program

1 INTRODUCTION:

The Johnson O'Malley (JOM) program is a federally funded program authorized by the Johnson O'Malley Act of 1934. This act authorizes contracts to benefit eligible Indian students enrolled in public schools. **These programs will be annual, and each incentive is subject to availability. Meaning at any time the amount of the incentives, the availability of the incentives could change or no longer be available.**

2 PURPOSE:

The purpose of the JOM program is to ensure that Peoria children receive educational opportunities that would not otherwise be provided by the public school system. Providing additional educational incentives helps lower dropout risks (i.e. Additional tutoring), promotes academic achievement and provides financial relief for families.

3 STUDENT ELIGIBILITY CRITERIA:

- 3.1 Student must be ages Pre-K through 12th grade according to the JOM Act regulations
- 3.2 Student must either be $\frac{1}{4}$ degree Indian blood, blood descendants of a member of an Indian tribe or be an enrolled member of a Federally recognized tribe to be eligible for the JOM program.
- 3.3 Student must **not** be enrolled in a Bureau funded school, private school or sectarian school to be eligible.
- 3.4 Student must live in the United States service area and be enrolled in an accredited public school.
- 3.5 Student must be an enrolled member of the Peoria Tribe.

4 JOM APPLICATIONS:

- 4.1 The application and completed paperwork, with all the required documentation must be submitted with a valid tribal ID and signed by legal representative of the student.
- 4.2 Applications can be downloaded from the Peoria Tribe of Indians of Oklahoma website or picked up at Peoria Tribe of Indians of Oklahoma headquarters.
- 4.3 The submission date of the application will be the date application was received at the tribal office. Please make sure all applications are postmarked before any deadlines.
- 4.4 Deadlines for Academic Incentive program, Chrome book Fees, Graduation Assistance must be submitted before June 30 of the academic year.

5 HIGH SCHOOL/SENIOR GRADUATE ASSISTANCE:

5.1 *CAP, GOWN, TASSLE, SENIOR PORTRAITS, SENIOR GRAD ANNOUNCEMENTS (up to \$150.00 ONE TIME)*

- A. Students need to submit a completed application with Vendor name, address and W9 for payment going directly to Vendor or submit original receipts and W9 for reimbursement.

5.2 *LETTERMAN JACKETS (up to \$150.00 ONE TIME)*

- A. Students need to submit a completed application with Vendor name, address and W9 for payment going directly to Vendor or submit original receipts and W9 for reimbursement.

6 CHROME BOOK INSURANCE/USER FEES: (Max \$30 One application per year per student)

- A. Students need to submit a completed application with Vendor name, address and W9 for payment going directly to Vendor or submit original receipts and W9 for reimbursement.

7 COLLEGE CONCURRENT CLASSES: (Max \$300 yearly per year student)

- 7.1 Student must be enrolled in an accredited high school and enrolled in college courses during the same year. Schedules must be submitted from high school and college of current academic year.
 - A. Students need to submit a completed application with Vendor name, address and W9 for payment going directly to vendor.
 - B. Students need to submit original receipts and completed application for reimbursement.

8 PRIVATE TUTORING/SPEECH THERAPY: (MAX \$150 A YEAR)

- 8.1 Students who participate in private tutoring outside of the public school are eligible.
- A. Tutoring facility or tutors must be accredited and documentation submitted that supports the accreditation.
 - B. Students need to submit original receipts, a completed W9 and completed application for reimbursement.
 - C. Students need to submit a completed application with vendor name, address and W9 for payment.
 - D. Speech therapy services must be proven to be needed by a therapist, not paid for by insurance (co-pays are eligible) or the school, to be considered for reimbursement or payment.

9 ACADEMIC INCENTIVE: (Grades Pre-K- 12)

- 9.1 Incentive payouts by grade and GPA.

- A. 1st grade -3rd grade \$25 with all “Satisfactory” and above and/or 2.5-4.0 GPA**
- B. 4th grade – 8th grade \$50 with a 2.5-3.5 GPA**
- C. 4th grade -8th grade \$100 3.6-4.0 GPA**
- D. 9th grade -11th grade \$50 with a 2.5-3.5 GPA**
- E. 9th grade -11th grade \$100 with 3.6-4.0 GPA**
- F. 12th grade \$100 with a 2.5-3.5 GPA**
- G. 12th grade \$150 with a 3.6-4.0 GPA**

- 9.2 Students need to submit a completed application with required documentation by June 30th deadline. No late applications will be accepted.
- 9.3 Report cards and transcripts must include 1st and 2nd semester grades.
- 9.4 ***Incentive amounts are based on the availability of funds and could change each academic year.***

10. SCHOOL FEES: (MAX \$100.00)

- 1.1 Students need to submit completed application and original receipt of payment for testing or application fees for reimbursement
- 1.2 Band equipment rentals, Vo-Tech supply fees, ACT/ SAT, College application fees etc.



PEORIA TRIBE

OF INDIANS OF OKLAHOMA

118 S Eight Tribes Trail. | Miami, OK 74354

(918) 540-2535 | rnair@peoriatribes.com

Johnson O'Malley (JOM) Program

CONCURRENT CLASSES APPLICATION \$300 YEARLY MAX

(Assistance program is based on funding availability each year)

Student Name (printed): Peoria Tribal Roll #:

Email Address:

Grade: Academic School Year:

School Name:

School Address: School Phone #:

Parent/Guardian Name:

Parent/Guardian Signature: Date:

Parent/Guardian Address:

Parent/Guardian Phone Number:

Verification of Enrollment for (Student's Name):

Dear School Official: Please verify whether the above-named student is enrolled in
Concurrent Classes during the Academic Year of: 20 /20

Concurrent Classes Student is enrolled in:

Cost of Concurrent Classes:

Name of College/University:

Printed Name of School Counselor/Administrator:

Signature of School Counselor/Administrator: Date

**Please attach receipts, tribal ID, and completed application for
reimbursement. If payment is being made directly to the vendor, attach their
W9 with completed paperwork.**

Approved: Denied: JOM Coordinator:



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Johnson O'Malley (JOM) Program

EDUCATION SUPPORT

(Assistance program is based on funding availability each year)

For students to actively participate in school activities, education support items are sometimes needed. Parents/ Guardians must complete this application for assistance and **attach original receipt/ invoice ticket for requested items and copy of enrollment card.** Please return to the Peoria Tribe of Indians of Oklahoma JOM Coordinator located at the Peoria Tribal Headquarters. *Assistance is eligible for one student per academic year. Assistance programs are based on funding eligibility each year. Speech therapy must have dr order, Co pay/ Private pay receipt, not be conducted at the school or paid for by Sooner Care/ Medicare. Private tutoring must be completed by an accredited teacher/agency, not be conducted at the school and have a valid invoice and valid receipt of payment.*

Student Name (printed):

Date of Birth: Peoria Tribal Roll #: Grade: School Year:

Parent/Guardian Name:

Mailing Address:

Email: Phone #:

Assistance Request: *Assistance is eligible for one student per academic year.*

Please check one:

Chromebook fees (max \$30) Private tutoring or Speech (max \$150 yr.)

Vo-Tech fees ACT/SAT fees College App fees Other.....

Vendor: Total Cost Requested:

Check payable to:

.....
Parent/Guardian Signature:

.....
Date

DO NOT FILL IN BELOW THIS LINE

Does this applicant meet the criteria for services: Approved: Denied:

Reason for denial:

JOM Coordinator Signature: Date:



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Johnson O'Malley (JOM) Program

GPA INCENTIVE AWARD APPLICATION

(Assistance program is based on funding availability each year)

This program is available to students enrolled in the 1st - 11th grades who have been promoted to the next grade level and for 12th grade students who have made a 2.5 GPA or above at the end of the current academic school year. **Incentive amounts and Incentive program are based on the availability of funds.**

Applications and required documentation must be postmarked by the June 30th deadline.

Please submit: 1) Application 2) Peoria Enrollment Card 3) Both semester copies of official report card/transcript (for 1st to 11th grade) or official transcript (for 12th grade). Report Cards and Transcripts must include the 1st and 2nd semester grades, child's name, school name and be submitted at the same time to be eligible for incentive.

INCENTIVE AMOUNTS

- 1st grade-3rd grade \$25 with all Satisfactory and above or 2.5-4.0 GPA
- 4th grade-8th grade \$50 with a 2.5-3.5 GPA
- 4th grade-8th grade \$100 3.6-4.0 GPA
- 9th grade-11th grade \$50 with a 2.5-3.5 GPA
- 9th grade-11th grade \$100 with 3.6-4.0 GPA
- 12th grade \$100 with a 2.5-3.5 GPA
- 12th grade \$150 with a 3.6-4.0 GPA

Student Name (printed): Peoria Tribal Roll #:

Final GPA for Current

Academic School Year: Grade: Date of Birth:

Parent/Guardian Name:

Mailing Address:

Email: Phone #:

.....
Parent/Guardian Signature:

.....
Date

PLEASE NOTE: INCOMPLETE APPLICATIONS CANNOT BE PROCESSED

DO NOT FILL IN BELOW THIS LINE

Enrollment Verification Attached: YES NO

Report Card/Transcript Attached: YES NO

Does this applicant meet the criteria for services: Approved: Denied:

Reason for denial:

JOM Coordinator Signature: Date:



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Johnson O'Malley (JOM) Program SENIOR GRADUATION ASSISTANCE PROGRAM *(Assistance is one time and max \$150)*

Student Name (printed):

Date of Birth: Peoria Tribal Roll #: Grade:

Parent/Guardian Name:

Mailing Address:

Email: Phone #:

Assistance Request:

Please check one:

Senior Cap/Gown

Senior Portraits

Senior Graduation
Announcements

Letterman Jacket (payments made directly to Vendors must have Vendor's W9 submitted in the application)

Vendor: Total Cost Requested:

Please submit:

- Completed Application
- Copy of Peoria Tribal Card
- Invoice for payment (payment for Vendor Directly)
- Invoice and Receipt of payment for reimbursement

Please read before signing:

I understand that the above information, if false, may lead to the disapproval of this application. I certify that the information is true and correct to the best of my knowledge.

.....
Parent/Guardian Printed Name:

.....
Parent/Guardian Signature:

.....
Date

DO NOT FILL IN BELOW THIS LINE

Does this applicant meet the criteria for services: Approved: Denied:

Reason for denial:

JOM Coordinator Signature: Date: