



Confederated Tribes of Siletz Indians

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JOHNSON O'MALLEY (JOM) PROGRAM
REQUEST FOR SERVICES

To qualify for services, the student must have a JOM application on file with the education department.

JOM Students' Name: \_\_\_\_\_

Update information for JOM file:

Form with fields for: Parent/Legal Guardian's Name, County of Residence, Mailing Address, City and ZIP Code, Home Telephone, Daytime Telephone, Message Telephone, Current School Attending, Grade, S.S. Number or Roll Number.

Information on Service Requesting:

Type of Service Requesting: [ ] Cultural Enhancement [ ] Parental Cost (shoes, sports fees, etc.)
[ ] Preschool Assistance [ ] Tutoring (need tutoring forms)

REASON FOR REQUEST: \_\_\_\_\_

Approximate cost for this request: (some requests have a maximum not to exceed limit due to limited funds, please inquire if needed. -i.e. shoes not to exceed \$35.00): \$ \_\_\_\_\_

VENDORS NAME
(store, company, etc): \_\_\_\_\_
ADDRESS (if known): \_\_\_\_\_

Signature of Parent/Legal Guardian \_\_\_\_\_ Date \_\_\_\_\_

For Office Use Only: [ ] Approved \$ \_\_\_\_\_ [ ] Denied \_\_\_\_\_