

**Madison District Office** 

5601 N. 16th Street Phoenix, AZ 85016 Phone: 602.664.7900 Fax: 602.664.7999 madisonaz.org

ADMINISTRATIVE OFFICES

Quinn R. Kellis, Ed.D. Superintendent

Barbara Marshall
Assistant Superintendent for
Educational Services

Lori Garvey, CPA Assistant Superintendent for Administrative Services

## Dear Parent(s)/Guardian(s):

Madison Elementary School District's Native American program is designed to address the educational and social needs of Native American students. We receive funding through the Title VI Indian Education and Johnson O'Malley grants to provide supplemental academic and enrichment activities that are culturally relevant for Native American students.

Madison reports the number of eligible Native American students to the Office of Indian Education in Washington D.C. and the Indian Education Office at the Arizona Department of Education to determine the district's eligibility for funding and funding calculations.

The number of students we report is based on the documents we receive regarding students, so it is important to complete and submit documents to ensure continued support services.

To determine a student is eligible under the Title VI and JOM grants, the following documents need to be completed and submitted:

- Title VI ED 506 Indian Student Eligibility Certification Form
- Indian Student Enrollment/Certification of Eligibility (Form 305)
- Copy of Certificate of Indian Degree of Blood (CIDB) **OR** Request form for a copy of CIDB from Tribal Enrollment Office

Please submit the signed and completed documents to Sylvia Kish at Madison Park School, 1431 East Campbell Ave, Phoenix, AZ 85014 or you may submit the forms to your child(ren)'s school front office. Instructions on completing the forms are provided.

If you have any questions, please contact Sylvia Kish at (602) 664-7584 or Andrea Gumper at (602) 664-7925. Thank you for your continued support for Native American Programs at Madison.

Sincerely Yours,

Dr. Michael Winters

Executive Director of Curriculum & Instruction

MW/ag Attachments OMB Number: 1810-0021 Expiration Date: 02/29/2020

### **INSTRUCTIONS FOR THE ED 506 FORM**

### FOR APPLICANTS:

**PURPOSE:** To comply with the requirements in 20 USC 7427(a), which provides that: "The Secretary shall require that, as part of an application for a grant under this subpart, each applicant shall maintain a file, with respect to each Indian child for whom the local educational agency provides a free public education, that contains a form that sets forth information establishing the status of the child as an Indian child eligible for assistance under this subpart, and that otherwise meets the requirements of subsection (b)".

**MAINTENANCE:** A separate ED 506 form is required for each Indian child that was enrolled during the count period. A new ED 506 form does **NOT** have to be completed each year. All documentation must be maintained in a manner that allows the LEA to be able to discern, for any given year, which students were enrolled in the LEA's school(s) and counted during the count period indicated in the application.

## **FOR PARENTS/GUARDIANS:**

**DEFINITION:** Indian means an individual who is (1) A member of an Indian tribe or band, as membership is defined by the Indian tribe or band, including any tribe or band terminated since 1940, and any tribe or band recognized by the State in which the tribe or band resides; (2) A descendant of a parent or grandparent who meets the requirements described in paragraph (1) of this definition; (3) Considered by the Secretary of the Interior to be an Indian for any purpose; (4) An Eskimo, Aleut, or other Alaska Native; or (5) A member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect on October 19, 1994.

STUDENT INFORMATION: Write the name of the child, date of birth and school name and grade level.

**TRIBAL ENROLLMENT INFORMATION:** Write the name of the individual with the tribal membership. Only one name is needed for this section, even though multiple persons may have tribal membership. Select only one name: either the child, child's parent or grandparent, for whom you can provide membership information.

Write the name of the tribe or band of Indians to which the child claims membership. The name does not need to be the official name as it appears exactly on the Department of Interior's list of federally-recognized tribes, but the name must be recognizable and be of sufficient detail to permit verification of the eligibility of the tribe. Check only one box indicated whether it is a Federally Recognized, State Recognized, Terminated Tribe or Organized Indian Group. If Terminated Tribe or Organized Indian Group is elected, additional documentation is required and must be attached to this form.

- Federally Recognized- an American Indian or Alaska Native tribal entity limited to those indigenous to the U.S. The Department of Interior maintains a list of federally-recognized tribes, which OIE can provide you upon request.
- State Recognized- an American Indian or Alaska Native tribal entity that has recognized status by a State. The U.S. Department of Education does not maintain a master list. It is recommended that you use official state websites only.
- **Terminated Tribe**-a tribal entity that once had a federally recognized status from the United States Department of Interior and had that designation terminated.
- Organized Indian Group- Member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect October 19, 1994.

Write the enrollment number establishing the membership of the child, if readily available, or other evidence of membership. If the child is not a member of the tribe and the child's eligibility is through a parent or grandparent, either write the enrollment number of the parent or grandparent, or provide other proof of membership. Some examples of other proof of membership may include: affidavit from tribe, CDIB card or birth certificate. Write the name and address of the organization that maintains updated and accurate membership data for such tribe or band of Indians.

**ATTESTATION STATEMENT:** Provide the name, address and email of the parent or guardian of the child. The signature of the parent or guardian of the child verifies the accuracy of the information supplied.

The Department of Education will safeguard personal privacy in its collection, maintenance, use and dissemination of information about individuals and make such information available to the individual in accordance with the requirements of the Privacy Act.

PAPERWORK BURDEN STATEMENT According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless such collection displays a valid OMB control number. The valid OMB control number for this information collection is 1810-0021. The time required to complete this portion of the information collection per type of respondent is estimated to average: 15 minutes per Indian student certification (ED 506) form; including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collection. If you have any comments concerning the accuracy of the time estimate(s) or suggestions for improving this form, please write to: U.S. Department of Education, Washington, D.C. 20202-4651. If you have comments or concerns regarding the status of your individual submission of this form, write directly to: Office of Indian Education, U.S. Department of Education, 400 Maryland Avenue, S.W., LBJ/Room 3W203, Washington, D.C. 20202-6335. OMB Number: 1810-0021 Expiration Date: 02/29/2020.

OMB Number: 1810-0021 Expiration Date: 02/29/2020

# U.S. Department of Education Office of Indian Education Washington, DC 20202 TITLE VI ED 506 INDIAN STUDENT ELIGIBILITY CERTIFICATION FORM

Parent/Guardian: This form serves as the official record of the eligibility determination for each individual child included in the student count. You are not required to complete or submit this form. However, if you choose not to submit a form, your child cannot be counted for funding under the program. This form should be kept on file and will not need to be completed every year. Where applicable, the information contained in this form may be released with your prior written consent or the prior written consent of an eligible student (aged 18 or over), or if otherwise authorized by law, if doing so would be permissible under the Family Educational Rights and Privacy Act, 20 U.S.C. § 1232g, and any applicable state or local confidentiality requirements.

# **STUDENT INFORMATION** \_\_\_\_\_\_ Date of Birth \_\_\_\_\_ Grade \_\_\_\_\_ (As shown on school enrollment records) Name of the Child \_\_\_\_\_ Name of School TRIBAL ENROLLMENT Name of the individual with tribal enrollment: (Individual named must be a descendent in the first or second generation) The individual with tribal membership is the: \_\_\_\_\_ Child \_\_\_\_ Child's Parent \_\_\_\_ Child's Grandparent Name of tribe or band for which individual above claims membership: The Tribe or Band is (select only one): Federally Recognized \_\_\_\_\_ State Recognized \_\_\_\_\_ Terminated Tribe (Documentation required. Must attach to form) Member of an organized Indian group that received a grant under the Indian Education Act of 1988 as it was in effect October 19, 1994. (Documentation required. Must attach to form) Proof of enrollment in tribe or band listed above, as defined by tribe or band is: A. Membership or enrollment number (if readily available) OR B. Other Evidence of Membership in the tribe listed above (describe and attach) Name and address of tribe or band maintaining enrollment data for the individual listed above: \_\_\_\_\_\_\_\_Address \_\_\_\_\_\_ City \_\_\_\_\_ State \_\_\_ Zip Code \_\_\_\_ ATTESTATION STATEMENT I verify that the information provided above is accurate. Name Parent/Guardian \_\_\_\_\_\_ Signature \_\_\_\_\_ Address\_\_\_\_\_\_ City\_\_\_\_\_ State\_\_\_\_ Zip Code \_\_\_\_\_\_

Email Address \_\_\_\_\_ Date \_\_\_\_\_

## **INSTRUCTIONS FOR 305 FORM (JOM)**

To apply for an entitlement grant under Public Law 93-638, Johnson-O'Malley, CRF 25, the program applicant must determine the number of eligible Indian children to be enrolled.

Items 1-4 allows the parent one form for all children in the family

Item 5 provides certification of eligibility by the parent/legal guardian signature

**Items 6-7** are reserved for the Indian Education Committee, who must certify with the applicant the total number of eligible children that are qualified to participate in the program

## Johnson O'Malley, CFR 25, 273.12 Eligible students states:

- Age 3 years through grade(s) 12;
- One-forth (1/4) or more degree Indian blood;
- Recognized by the Secretary of the Interior as being eligible for Bureau of Indian Affairs services

You are not required to submit this form. However, if you choose not to submit, your child cannot be counted for entitlement funding under Johnson O'Malley, CFR 25.

## 305 FORM (JOM)

INDIAN STUDENT ENROLLMENT/CERTIFCATION OF ELIGBILITY UNDER P.L. 93-638 CFR 273.18(K).(1)

Certificate of Indian Blood (CIB or Tribal enrollment letter is required.

Last Name	First Name	Tribal #	Date of Birth	Grade	School	Student #
Are the student(s) lis	ted above 1/4 or more	degree in Ind	ian Blood?			
	Yes	No	l don'	t know		
Are the student(s) lis	ted above members of	a federally re	cognized trik	e?		
	Yes	No	l don'	t know		
				T '1   A CC'11		
	Studentie)			Tribal Affilia	ation	
Parent/Leg	Student(s) al Guardian					
A Copy of the studen	t's Certificate of Indiar this completed 305 fo				ne Tribe is required	d for eligibility and
My signature certifie	s that the information	given is correc	ct.			
Print Name and Ad	dress of Parent/Legal (	Guardian	Signatur years old		/Legal Guardian (Si	gnature of Student if 1
			Date:			
		DO NOT FIL				
	(Space is rese	erved for the li	ndian Educat	tion Commit	ttee)	
he above information l ligible to receive JOM I	<u> </u>	the Parent Cor	mmittee and No	certifies tha	at the student(s) lis	sted above are
Type/Print Name of Member Reviewee	f Indian Education Con :	nmittee	Signatur	e of Indian I	Education Commit	tee Member:
			Date:			

## To: Tribal Enrollment Office

Date of Birth Place of Birth  Tribe/Degree Census/ Enrollment Number  Father Mother's Maiden  Date of Birth Date of Birth  Place of Birth Place of Birth  Tribe/Degree Tribe/Degree Census/ Enrollment Number Number  Paternal Grandfather Grandmother Date of Birth Place of Birth  Tribe/Degree Tribe/Degree  Census/ Enrollment Number Number  Paternal Grandfather Grandmother Date of Birth Place of Birth  Tribe/Degree Tribe/Degree Census/ Enrollment Number Number  Maternal Grandfather Grandmother Date of Birth Place of Birth Place of Birth Place of Birth Number Tribe/Degree Tribe/Degree  Census/ Enrollment Number Date of Birth Place of Birth Place of Birth  Place of Birth Place of Birth Place of Birth Place of Birth Place of Birth Place of Birth  Tribe/Degree Tribe/Degree  Census/ Enrollment Number Number	tudent				
Father Mother's Maiden Date of Birth Date of Birth Place of Birth Paternal Grandfather Date of Birth Place Degree Census/ Enrollment	Pate of Birth	Place of Birth			
Date of Birth  Place of Birth  Paternal  Grandfather  Date of Birth  Place of Birth	ribe/Degree	Census/ Enrollment Number			
Place of Birth  Place of Birth  Tribe/Degree  Tribe/Degree  Census/ Enrollment Jumber  Paternal Grandfather  Date of Birth  Place of Birth	ather	Mother's Maiden			
ribe/Degree ensus/ Enrollment lumber  Census/ Enrollment Number  Paternal grandfather late of Birth  Date of Birth  Place of Birth  Place of Birth  Iumber  Maternal grandfather  Adaternal grandfather  Date of Birth  Place of Birth  Place of Birth  Place of Birth  Place of Birth  Date of Birth  Place of Birth  Tribe/Degree  Ensus/ Enrollment  Place of Birth	ate of Birth	Date of Birth			
ensus/ Enrollment umber  Census/ Enrollment Number  Paternal Grandmother ate of Birth  Date of Birth  Place of Birth  Place of Birth  Internal Trandfather Trandfa	lace of Birth	Place of Birth			
Atternal Paternal Grandmother atte of Birth Place of Birth Place of Birth Census/ Enrollment Maternal Grandmother Mumber Maternal Grandmother Number Tribe/Degree	ribe/Degree	Tribe/Degree			
randfather Grandmother ate of Birth Date of Birth  lace of Birth Place of Birth  ribe/Degree Tribe/Degree  ensus/ Enrollment Umber Number  Maternal Grandmother Grandmother ate of Birth Date of Birth  lace of Birth Place of Birth  ribe/Degree Tribe/Degree  ensus/ Enrollment Grandmother  ate of Birth Date of Birth  ribe/Degree Tribe/Degree  ensus/ Enrollment  Census/ Enrollment	· · · · · ·				
lace of Birth  Place of Birth  Tribe/Degree  ensus/ Enrollment umber  Census/ Enrollment Number  Number  Maternal randfather ate of Birth  Date of Birth  Place of Birth  Census/ Enrollment  Census/ Enrollment					
Tribe/Degree  ensus/ Enrollment umber  Census/ Enrollment Number  Maternal randfather ate of Birth ace of Birth Place of Birth ribe/Degree ensus/ Enrollment  Census/ Enrollment  Tribe/Degree ensus/ Enrollment  Census/ Enrollment	ate of Birth	Date of Birth			
Census/ Enrollment umber  Maternal randfather Grandmother ate of Birth place of Birth cibe/Degree pensus/ Enrollment Census/ Enrollment	ace of Birth	Place of Birth			
Maternal randfather ate of Birth ace of Birth place of Birth place of Birth Tibe/Degree ensus/ Enrollment  Number  Maternal Grandmother Date of Birth Place of Birth Tribe/Degree Census/ Enrollment	ibe/Degree	Tribe/Degree			
randfather Grandmother ate of Birth Date of Birth lace of Birth Place of Birth ribe/Degree Tribe/Degree ensus/ Enrollment Census/ Enrollment					
Date of Birth Place of Birth ribe/Degree Pensus/ Enrollment  Date of Birth Place of Birth Census/ Enrollment					
ribe/Degree Tribe/Degree ensus/ Enrollment Census/ Enrollment					
ensus/ Enrollment Census/ Enrollment	ace of Birth	Place of Birth			
	ibe/Degree	Tribe/Degree			
		·			
	(address or lo				
ribe, to the Madison School District No. 38. (address or location)					

Madison School District No. 38 Native American Program 5601 N 16<sup>th</sup> Street, Phoenix, AZ 85016