

Effective: 2/1/19

# Cheyenne & Arapaho Tribes Johnson O'Malley Gaming Application

Date of application \_\_\_\_\_

Name \_\_\_\_\_ DOB \_\_\_\_\_

School Attending \_\_\_\_\_ Grade \_\_\_\_\_

Tribal Enrollment # \_\_\_\_\_ CDIB 2 \_\_\_\_\_ Other \_\_\_\_\_ Phone # \_\_\_\_\_

Parent/Guardian Signature \_\_\_\_\_ Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

### ATHLETIC SHOES/PE SHOES

\*JOM will pay up to 70% total cost of shoes. Unless request is deemed as a Hardship JOM will pay 100%.

\*Shoe reimbursements allowed with original receipt only.

\*School team shoes, will require original invoice. Checks will be made payable to school or vendor.

\*Students deemed hardship under DHS custody, foster care, or family provider other than parents care.

**\*All requests must provide documentation from school on letterhead, class or camp information must be submitted.**

Please check an item/items that your child may need assistance with:

\_\_\_\_\_ Athletic shoes  
(football, baseball, softball, soccer, basketball)

\_\_\_\_\_ Extra Curricular/School  
Uniforms (Letter from school required)

\_\_\_\_\_ Fields Trip Fee

\_\_\_\_\_ PE Shoes \$50.00  
(School Letter Required)

\_\_\_\_\_ Activity needs/supplies

\_\_\_\_\_ School/Class Fee

\_\_\_\_\_ ACT/SAT Testing Fee

\_\_\_\_\_ Graduation Cap/Gown Fee

\_\_\_\_\_ Eye Assistance  
(Once a year, up to \$200)

\_\_\_\_\_ Vo Tech/Summer School Fee

\_\_\_\_\_ Band Instrument Rental

\_\_\_\_\_ Driver's Ed Fee  
(JOM will only pay 1/2 of  
the fees, and only during  
the months of April-July)

\_\_\_\_\_ Concurrent Classes (Jr/Sr Only)  
(JOM will assist with book purchases only)

\_\_\_\_\_ Correspondence Course  
(Only if class is required for Graduation)

\_\_\_\_\_ School Related Activities (camps, national and state activities)  
(Must be school related, and recommended by school)

### **Please provide documentation such as an Invoice, Quote, School Letter, Etc.**

Make check payable to:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Eastbay** 1st choice:

2nd choice:

Product # \_\_\_\_\_

Product # \_\_\_\_\_

Shoe Size \_\_\_\_\_

Shoe Size \_\_\_\_\_

**\*First choice/second choice needed, some shoes are  
unavailable in sizes when ordering.**

Did applicant receive any assistance from Respect for athletic shoes? YES/NO

Hardship\$ \_\_\_\_\_

Approved amount \$ \_\_\_\_\_

Eastbay/Parent OWES \$ \_\_\_\_\_

**Please submit application to: Johnson O'Malley Program  
Po Box 167  
Concho, Ok 73022**

**You can also email your application and documentation to  
nlumpmouth@c-a-tribes.org or francine.williams@c-a-tribes.org  
405-422-7566 or 405-422-7658**

**Fax # 405-422-8212**

**Approved By: \_\_\_\_\_**