



Absentee Shawnee Tribe of Oklahoma Education Department

ACADEMIC PROGRAM (PK-12) ZAHN PROGRAM (HS Seniors/GED Recipients)

I am applying for the: Academic Program Zahn Program

This application is for one or both of the above listed programs, check applicable box(es)

Name: _____ Age: _____ Grade Level: _____

Social Security Number: _____ Phone: _____

Parent(s)/Guardian(s): _____

Address: _____

School: _____

Brief description of student needs:

ATTACH A COPY OF TRIBAL ENROLLMENT CARD

ATTACH A COPY OF CLASS SCHEDULE OR NOTE FROM SCHOOL OFFICIAL (if applying for school athletic assistance)

THERE WILL BE NO DUPLICATION OF SERVICES BETWEEN AST 477, JOHNSON O'MALLEY (JOM), OR OTHER EDUCATION PROGRAMS. THESE PROGRAMS WILL NOT PAY FOR THE SAME EXPENSE.