



Nooksack Indian Tribe Johnson O'Malley Program Application

Must have tribal ID or Certificate Degree of Indian Blood on file.

Student Information *please print*

Child's full legal name: _____ Male _____ Female

Tribal Affiliation: _____

Date of Birth: _____ Grade: _____

School: _____ City: _____ State: _____

Is your child in Special Education? _____ Yes _____ No

Does your child have an IEP? _____ Yes _____ No

Parent/Guardian Information *please print*

Parent/Guardian name: _____ Tribal Affiliation: _____

Address: _____

Phone Number: _____ Alternate phone number: _____

Email Address: _____

Nooksack Tribe Education Department
P.O. Box 157, Deming WA 98244 – 5604 Mission Rd., Bellingham, WA 98226
(360)-592-5176 (360)-966-9696
Jessica Williams, Assistant to Education Director
jessica.williams@nooksack-nsn.gov

