Ventura County Indian Education Consortium

Title VI Federal Project – Serving Public School Districts in Ventura County Since 1974

For Students with Native American Heritage

Dear Parent:

Your child may be eligible to enroll in the Title VI Indian Education Program if you, your child or his/her grandparent are an enrolled member of an American Indian tribe, band or group or Alaskan Native tribe or corporation or if you, your child or a grandparent have a Certificate of Degree of Indian Blood (CDIB).

To enroll, complete the attached **Program Enrollment Request AND Eligibility Certification Form (ED 506)**. Return both documents to your school office, to the mailing or email address below. Be sure to include a tribal enrollment number or a copy of other evidence (CDIB, village or tribal ID, birth certificate, etc.) and the address of the organization maintaining membership.

The ED 506 form is available in your school office or can be found on our website (https://www.venturausd.org/students/indian-education). For questions regarding eligibility contact our office at (805) 641-5000, Ext. 1193 or email robin.jacobs@venturausd.org. Our website provides helpful information for tracing your American Indian ancestry as well as other program information.

Each student of American Indian descent who enrolls in our program helps generate funds to support educational programming in Ventura County for students in grades K-12 with Indian heritage. If your child qualifies he/she will be entitled to receive free supplemental services which may include:

School Districts Served

ω Conejo Valley Unified • Fillmore Unified • Hueneme Elementary • Moorpark Unified • Oak Park Unified • Ojai Unified • Oxnard Elementary • Oxnard Union High • Pleasant Valley• Rio • Simi Valley Unified • Ventura Unified (LEA) • • Ventura Charter • Vista Real Charter •

- Indian Studies lessons (with reading skills development)
- Counseling
- Career and College awareness
- Information about scholarships, grants and other financial aid available for American Indian students

Indian Education Program Enrollment Request



Attach to TITLE VI ED 506 INDIAN STUDENT ELIGIBILITY CERTIFICATION FORM and

*return to your child's school

*email to robin.jacobs@venturausŘ.org OR

*mail to: Ventura County Indian Education Consortium
Ventura Unified School District
255 W. Stanley Avenue, Suite 100
Ventura, CA 93001-1348

Student Name: _____ψψ_____

Parent/Guardian's Name: _____ψ_____

Phone Number: _____ψ_____

Email Address: _____

School District:_____**School Name:**_____

Consorcio del condado de Ventura para la educación indígena estadounidense

Proyecto federal Título Vi – Sirviendo a los distritos escolares del Condado de Ventura desde 1974

Para estudiantes con ascendencia nativa estadounidense

Estimados padres de familia:

Su hijo podría ser elegible para participar y matricularse en el Programa de Educación Indígena Estadounidense Título VI si usted, su hijo, o sus abuelos están registrados como miembros de una tribu, banda o grupo indígena Estadounidense, o una tribu o corporación nativa de Alaska, o si usted o su hijo o sus abuelos poseen un Certificado de Grado Sanguíneo Indígena (CDIB).

Para registrarse, complete la solicitud adjunta de **Registración para el Programa** y el **Formulario de Certificación de Elegibilidad (F506).** Entregue ambos documentos en la oficina de su escuela o envíenlos a VUSD por correo a la siguiente dirección. Para llenar estos documentos de manera digital, baje los formularios, firme el documento PDF y envíelos por medio de un correo electrónico. Asegúrese de incluir el número de registro de su tribu o copia de otra evidencia (CDIB, identificación de tribu o provincia, acta de nacimiento, etc.) y la dirección de la organización que posee dicha membresía.

El formulario adjunto ED 506 También está disponible en su oficina escolar y por medio de nuestro sitio web (https://www.venturausd.org/students/indian-education). Favor de contactar nuestra oficina al (805) 641-5000, extensión 1193 o envié electrónico a robin.jacobs@venturausd.org. Nuestro sitio web ofrece información para rastrear su ascendencia indígena junto con información adicional del programa.

Cada estudiante que posee ascendencia indígena estadounidense y que esté registrado en nuestro programa ayuda a generar fondos para respaldar la programación educativa en el Condado de Ventura para estudiantes en grados K-12 que poseen ascendencia indígena. Si su hijo califica, él o ella tendrán el derecho de recibir servicios gratuitos suplementarios los cuales podrían incluir:

Sirviendo a los siguientes Distritos Escolares

Conejo Valley Unified • Fillmore Unified Hueneme Elementary • Moorpark Unified • Oak Park Unified• Ojai Unified • Oxnard Elementary • Oxnard Union High • Pleasant Valley• Rio • Simi Valley Unified • Ventura Unified• Ventura Charter • Vista Real Charter

- Lecciones estudios indígenas (incluyendo desarrollo de las habilidades de lectura)
- Consejería
- Concientización de profesiones y universidades.
- Información sobre becas académicas, subsidios y otra ayuda financiera disponible para los estudiantes indígenas estadounidenses.

Solicitud de registro para el Programa Educación Indígena Norteamericano



Adjunte esta porción al FORMULARIO DE CERTIFICACIÓN DE ELEGIBILIDAD PARA ESTUDIANTES INDÍGENAS NORTEAMERICANOS TÍTULO VI ED 506 y entréguelo a uno de los siguientes:

- En la escuela de su hijo,
- Por correo electrónico a robin.jacobs@venturausd.org,
- Envíe por correo a:

Ventura County Indian Education Consortium
Ventura Unified School District
255 W. Stanley Avenue, Suite 100
VENTURA, CA 93001–1348

Nombre del estudiante: _____

Nombre del padre, madre o tutor legal: _____

Número de teléfono: _____

Dirección de correo electrónico: _____

Distrito escolar: _____ **nombre de la escuela:** _____

OMB Control No. 1810-0021 (Exp. 06/30/2026)

ED 506 Form
Indian Student Eligibility Certification Form for Title VI Indian Education Formula Grant Program

Parent/Guardian: This form serves as the official record of the eligibility determination for each individual child included in the student count for the Title VI Indian Education Formula Grant Program. If you choose to submit a form, your child could be counted for funding under the program. The grantee receives the grant funds based on the number of eligible forms counted during the established count period. You are not required to complete or submit this form unless you wish for your child(ren) to be included in the Indian student count. This form should be kept on file with the grant applicant 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

Name of the Child _____ Date of Birth _____ Grade level _____

Name of School _____ School District _____

Tribal Membership

The individual with Tribal membership is the (select only one): ◯ child ◯ child's parent ◯ child's grandparent

If the individual with Tribal membership is **not** the child listed above, name the individual (parent/grandparent) with tribal membership: _____

Name and address of Tribe or Band that maintains updated and accurate membership data for the individual listed above:

Name _____ Address _____

City _____ State _____ Zip Code _____

The Tribe or Band is (select only one):

- ◯ Federally Recognized Tribe
- ◯ State Recognized Tribe
- ◯ Terminated Tribe
- ◯ Alaska Native
- ◯ 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.

Proof of membership in Tribe or Band listed above, as defined by Tribe or Band is:

- ◯ Membership or enrollment number establishing membership (if readily available) or
- ◯ Other evidence establishing membership in the Tribe listed above (describe and attach)

Membership or enrollment number establishing membership (if readily available) or other evidence establishing membership in the Tribe listed above (describe and attach). _____

Attestation Statement
I verify that the information provided above is true and correct to the best of my knowledge and belief.

Printed Name of Parent/Guardian _____ Signature _____

Address _____ City _____ State _____ Zip Code _____

Phone Number _____ Email _____ Date _____

For Parent/Guardians:

Definitions:
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, grade level, name of school and school district. Only name one child per form.

Tribal Membership: Write the name of the individual with the tribal membership, if it is not the child listed. Only one name is needed for this section, even though multiple persons may have tribal membership. Select only one identifier: the child, child's parent or grandparent, for whom you can provide membership information.

Write the name and address of the organization that maintains updated and accurate membership data for such Tribe or Band of Indians. 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. Write the enrollment number establishing the membership for the child, parent or grandparent, if readily available, or other evidence of membership.

Attestation Statement: Provide the printed name of parent/guardian and signature, address, phone number 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.

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 3W238, Washington, D.C. 20202-6335

Ventura County Indian Education Consortium
Student Photo, Video, and Media Release

Dear Parent/Guardian:

The Ventura County Indian Education Consortium, including all participating School Districts, ("VCIEC") is proud of the many accomplishments of our students and staff. Often, the VCIEC highlights these accomplishments on social media, websites, brochures, and other marketing and communications platforms. Such achievements also draw the attention of newspapers, television stations, or other media. On occasion, representatives from and/or employees of the VCIEC and/or an invitee of the VCIEC wish to photograph, videotape, and/or interview individuals in connection with school programs, projects, or events. We value your child's participation and ask for your permission to include them. To give your consent, please complete the form below.

I, _____, parent/guardian of _____ give permission for my child to be photographed, videotaped, and/or interviewed by representatives from and/or employees of the VCIEC for educational and/or marketing purposes. I authorize the use and reproduction by the VCIEC or anyone authorized by the VCIEC of any and all photographs and/or videotapes taken of my child, and/or their artwork without compensation to me/my child. All of these photographs/video recordings shall be the property, solely and completely, of the VCIEC. I waive any right to inspect or approve the finished product that may be used in conjunction with them.

This permission applies to photographs, likenesses, poses, acts, appearances, voice, use of musical instruments, artwork, and written work. Artwork includes musical, dramatic, and other performances and presentations, as well as all forms of visual and digital artwork. Areas where these images and/or sound reproductions may appear include but are not limited to any of the following: VCIEC, participating school, District or other websites, television broadcasts (including streaming services), slide shows, school newspaper, annual yearbook, social media such as Facebook, Instagram, Twitter, Nextdoor and LinkedIn or promotional material.

I understand that by granting the VCIEC permission to use my child's name, photographs, likenesses, poses, acts, appearances, voice, use of musical instruments, artwork, and/or written work, the VCIEC will retain the right to use and reuse, in any manner at all, the video, motion picture, audio recording or still photograph productions, broadcasts, publications, presentations, performances, and/or artwork as described above. I also understand that by granting the VCIEC permission to use my child's name, photographs, likenesses, poses, acts, appearances, voice, use of musical instruments, artwork, and/or written work in the above-described manner, I hereby forever release and discharge the District from any and all claims, actions and demands, arising out of or in connection with the use of said video, motion picture, audio recording, still photograph, broadcasts, publications, presentations, performances, and/or artwork, including, without limitation, any and all claims for invasion of privacy and libel.

I understand that if my position on this authorization and release changes, I can revoke this document, in its entirety by contacting the VCIEC and notifying the coordinator in writing of said change.

☐ I grant permission for a media release for my child.

☐ I do not grant permission for a media release for my child.

_____ _____
Child's Name (Please print) Signature (Parent/Guardian)

_____ _____
Date Telephone Number

Granting of permission is voluntary. Please return completed form to the Ventura County Indian Education Consortium.

Consorcio del condado de Ventura para la educación indígena estadounidense
Publicación de fotografías estudiantiles, video y media

Estimado padre de familia/tutor legal:

El Consorcio del condado de Ventura para la educación indígena estadounidense ("VCIEC", por sus siglas en inglés), incluyendo a todos los Distritos Escolares participantes, está orgulloso de todos los logros de nuestros estudiantes y de nuestro personal. A menudo, el VCIEC publica estos logros en las redes sociales, sitios web, folletos y otras plataformas de mercadotecnia y comunicaciones. Tales logros también llaman la atención de los diarios periodísticos, estaciones de televisión u otros medios de comunicación. En ocasiones, los representantes y/o empleados del VCIEC y/o algún un invitado del VCIEC desean fotografiar, grabar en video y/o entrevistar a personas en relación con los programas escolares, proyectos o eventos. Nosotros valoramos la participación de su hijo y solicitamos su permiso para incluirlo. Para otorgar su consentimiento, por favor complete el siguiente formulario.

Yo, _____, padre/madre/tutor legal de _____
autorizo el uso y reproducción por parte de la VCIEC o cualquier persona autorizada por el VCIEC de todas y cada una de las fotografías y/o cintas de vídeo tomadas de mi hijo, y/o su obra de arte sin compensación para mí/mi hijo. Todas estas fotografías/grabaciones de vídeo serán propiedad, única y completa, del VCIEC. Renuncio a cualquier derecho a inspeccionar o aprobar el producto terminado que pueda utilizar dichas fotografías y/o grabaciones de video, etc.

Este permiso se aplica a fotografías, semejanzas, poses, actos, apariciones, voz, uso de instrumentos musicales, obras de arte y obras escritas. Las obras de arte incluyen actuaciones y presentaciones musicales, dramáticas y similares, así como todas las formas de obras de arte visuales y digitales. Las áreas donde estas imágenes y/o reproducciones sonoras pueden aparecer incluyen pero no se limitan a cualquiera de las siguientes: VCIEC, escuela participante, sitios web del distrito u otros, transmisiones de televisión (incluyendo servicios de video digital por internet), presentaciones de diapositivas, periódico escolar, anuario anual, redes sociales de comunicación como Facebook, Instagram, Twitter, Nextdoor y LinkedIn o material promocional.

Comprendo que al conceder al VCIEC permiso para usar el nombre de mi hijo, fotografías, semejanzas, poses, actos, apariciones, voz, uso de instrumentos musicales, obras de arte y/o trabajo escrito, el VCIEC conservará el derecho a usar y reutilizar, de cualquier manera, el video, la película, la grabación de audio o las producciones de fotografías fijas, emisiones, publicaciones, presentaciones, representaciones y/o obras de arte como se describe anteriormente. También entiendo que al otorgar al VCIEC permiso para usar el nombre de mi hijo, fotografías, semejanzas, poses, actos, apariciones, voz, uso de instrumentos musicales, obras de arte y/o trabajo escrito de la manera anteriormente descrita, por la presente libero y descargo al Distrito de todas y cada una de las reclamaciones, acciones y demandas, que surjan de, o en relación con, el uso de dicho video, película, grabación de audio, fotografía fija, emisiones, publicaciones, presentaciones, actuaciones y/o obras de arte, incluyendo, sin limitación, cualquier y todos los reclamos por invasión de la privacidad y difamación.

Comprendo que si mi posición sobre esta autorización y liberación cambia, puedo revocar este documento, en su totalidad poniéndome en contacto con el VCIEC y notificando al coordinador por escrito de dicho cambio.

☐ Concedo permiso para la publicación de materiales media de mi hijo.
☐ No concedo permiso para la publicación de materiales media de mi hijo.

Nombre del estudiante (letra de imprenta)	Firma de padre/madre/tutor legal
Fecha	Número de teléfono

Por favor llene y entregue este formulario al Consorcio del condado de Ventura para la educación indígena estadounidense.