



Welcome to The American Indian Education Program at Mounds View Public Schools (MVPS, ISD 621)

If you identified your student as American Indian/Alaskan Native during the enrollment process, you now have the support of our team! We are honored to partner with your family!

About Our Program

The MVPS American Indian Education Program supports the **academic success, social-emotional well-being, and cultural identity** of Native students across the district. Our program has advocated for American Indian students and families, serving as a resource for accurate curriculum, and creating opportunities for cultural learning and community connection for many years, and we continue to grow and evolve each year.

American Indian Education Liaisons meet with students individually and in groups, facilitate family engagement events, and partner with parents/guardians to help ensure students have the best educational experience possible. **The best part:** Your family can use any services or activities that feel meaningful, and skip those that aren't the right fit.

Eligibility & Opt-Out

All students who identify as American Indian/Native American in our district system are automatically welcomed into the program. There is **no cost** to participate. Our program is an **opt-out model**, meaning:

- Students are automatically placed on our caseload based on school enrollment information and families will receive program communication.
- If you are not interested in receiving services, you may opt your student out of groups, individual check-ins, or the entire program at any time by contacting our liaisons directly.

Please Complete the JOM and 506 Forms

This program is grant funded and relies on families completing the **506 Form** (Federal Title VI) and **JOM Form** (Johnson-O'Malley). While form completion is not required to participate in our program, completing these forms directly supports program funding and ensures continued services for Native students.

Eligibility: If your student, their parent, or their grandparent is enrolled in a federally recognized tribe, they qualify for both forms. Please complete the attached 506 and JOM forms, and return them via one of the options below:

Email: jill.spencer@mvpschools.org

Mail: MVPS American Indian Education Program

4570 Victoria Street No

Shoreview, MN 55126

Miigwech, Wopida, Pinigigi, Thank you for your support and for allowing our team to be part of your student's journey. We look forward to supporting your family.

MVPS American Indian Liaisons Jill Spencer, 651-341-1793 & Felicia Galvan, 651-396-9859

AMERICAN INDIAN EDUCATION

In a Nutshell

How do students join the program?

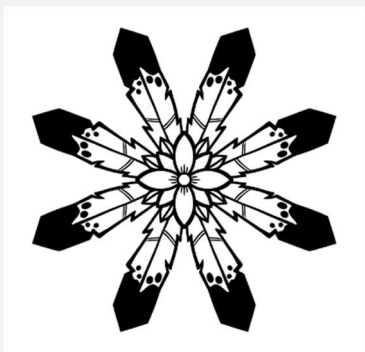
Students who identify as having Native American Heritage on their enrollment paperwork are automatically enrolled in the program. Families have the opportunity to opt-out if they wish.

What does American Indian Education do?

- Elementary Support
- Secondary Support
- Family/Community Support
- Additional Program Support
- Staff/District Support

Who is American Indian Education?

- 2 (two) American Indian Liaisons
- 250+ Native American Students and their families in the district supported by the program!



Elementary Support

- Monthly Cultural Group
- Act as a liaison between staff/school and families as needed
- Attend meetings including, but not limited to: student IEP, disciplinary, MTSS/SST, or any other general concerns that may occur
- Collaborate with building staff and students to create a presence of and safe space for our Native American Students

Secondary Support

- Monthly Cultural Group
- Provide individual and group support to build skill sets for success: time management, self-care, goal setting, etc.
- Guide & assist with College & Career Preparation
- Attend meetings including, but not limited to: student IEP, disciplinary, MTSS/SST, or any other general concerns that may occur
- Collaborate with building staff and students to create a presence of and safe space for our Native American Students

Liaisons do not monitor grades/attendance/behavior. School staff should contact the liaisons if there are concerns and/or when they themselves are struggling to connect with the family.

Family/Community Support

Bridge between home and general advocacy
Connecting family with school and community resources
Family Engagement &
Student Recognition Events
Cultural Events & Classes

Additional Program Support

Cultural Field Trips school / College Visits
Guest Speakers
Scholarships for tutoring and ACT prep
Connecting students/families with summer programming opportunities

Staff/District Support

- Answer questions & advise staff re: Culturally relevant/appropriate curriculum, lessons, and activities
- Provide Professional Development in building and District Wide
- Collaborate with District Curriculum Teams
- Connect teachers with culturally appropriate resources and information

The purpose of the MVPS American Indian Education program is to encourage and inspire academic achievement, social and emotional development and cultural awareness of our American Indian students. The program will serve as a resource to review and recommend accurate curriculum; and to promote cultural diversity between community, staff and students.

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 _____ Name of 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.

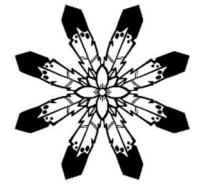
Tribal Membership: Write the name of the individual with the tribal membership, if it is not the child listed. Only one name is needed for this section, even though multiple persons may have tribal membership. Select only one identifier: the child, child's parent or grandparent, for whom you can provide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

MOUNDS VIEW PUBLIC SCHOOL DISTRICT
AMERICAN INDIAN EDUCATION PROGRAM
JOHNSON O'MALLEY INDIAN CERTIFICATION FORM



STUDENT INFORMATION

Last Name: _____ First Name: _____ MI: _____
Date of Birth: ____/____/____ Address: _____
City: _____ State: _____ Zip: _____
Tribal Affiliation/Reservation: _____ Blood Quantum: _____

MOTHER'S INFORMATION

☐ Indian -descendent ☐ Indian -enrolled ☐ Non-Indian

Last Name: _____ First Name: _____ Date of Birth: ____/____/____
Tribal Affiliation/Reservation: _____ Enrollment #: _____

FATHER'S INFORMATION

☐ Indian -descendent ☐ Indian -enrolled ☐ Non-Indian

Last Name: _____ First Name: _____ Date of Birth: ____/____/____
Tribal Affiliation/Reservation: _____ Enrollment #: _____

***Grandparent information is only needed if neither parent is an enrolled member.

GRANDPARENT INFORMATION

☐ Indian -descendent ☐ Indian -enrolled ☐ Non-Indian
☐ Maternal Grandparent ☐ Paternal Grandparent

Last Name: _____ First Name: _____ Date of Birth: ____/____/____ Tribal
Affiliation/Reservation: _____ Enrollment #: _____

PARENTAL STATUS: (Please check all that apply to the custody and residence of child.)

☐ Natural Parent ☐ Adoptive ☐ Other Family Member ☐ Foster ☐ Legal Guardian ☐ Other: _____

RELEASE OF INFORMATION: I authorize the Anoka-Hennepin School District American Indian Education Program and/or the Minnesota Chippewa Tribe and their designated person(s) to obtain/research my child's tribal membership and/ or blood quantum to determine JOM eligibility. In the event my child should transfer schools, I further authorize the Anoka-Hennepin School District American Indian Education Program and/or the Minnesota Chippewa Tribe Johnson O'Malley Program to share this certification form with the new school.

Parent/Guardian Name: _____

email: _____ Phone: _____

Parent/Guardian Signature: _____ Date: _____

*****TRIBAL ENROLLMENT/VERIFICATION: (Tribal Enrollment Official Use Only) *****

Please Check the Appropriate Box

The above-named student **does** meet the JOM eligibility criteria as determined by the BIA/BIE"

- ☐ Student is an enrolled member of the _____ Tribe OR
☐ Student is a 1st or 2nd generation descendant of _____ Tribe OR
☐ Parent is an enrolled member of the _____ Tribe OR
☐ Grandparent is an enrolled member of the _____ Tribe OR.

The above-named student **does not** meet the eligibility criteria for the following reason(s):

- ☐ Birth Record/Birth Certificate is needed to verify enrollment.
☐ No information was found regarding enrollment for student/family.

Signature of Tribal Official: _____ Date: _____