JOHNSON O’MALLEY

**Please Check**

* Fall (Sept-Nov)
* Winter (Dec-Feb)
* Spring (Mar-May)

LOCAL INDIAN EDUCATION COMMITTEE (IEC)

**IEC TRIANNUAL REPORT**

**IEC SCHOOL / NAME: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

*NOTE: The information on this report should cover the Johnson O’Malley Program and eligible Johnson O’Malley students only.*

|  |  |
| --- | --- |
| School JOM Contact Name: | Phone/Email: |

**REQUIRED ANNUAL JOM DOCUMENTATION:**

* IEC Membership List Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* IEC Bylaw Review Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Needs Assessment Survey and Results Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Notice of Public Hearing or Newsletter Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Education Plan (1-, 2-, or 3-Year Plan) Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_
* Annual Budget Date Completed: \_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
| **STUDENT SUMMARY** | | | |
| Number of JOM Eligible Students Counted |  | Number of JOM Students Actually Served (to date) |  |
| Grade Levels Counted |  | Grade Levels Served  (to date) |  |

|  |  |  |
| --- | --- | --- |
| **BUDGET SUMMARY** | | |
| FY Allocation Amount |  | **Notes:** |
| Spend-Down Funds, if any |  |
| Funds Utilized To Date |  |
| **Remaining Funds** |  |

|  |
| --- |
| **IEC MEETING DATES:** |

|  |
| --- |
| **ACCOMPLISHMENTS AND/OR ACTIVITES UNDERWAY:** |

|  |
| --- |
| **UNIQUE PROBLEMS ENCOUNTERED:** |

|  |  |
| --- | --- |
| IEC Chair Signature: | Date: |