

Office Location: 1701 Exchange Ave Oklahoma City, OK 73108

Phone: 405.587.0355 Fax: 405.587-0443 Mailing Address: P.O. Box 36609 Oklahoma City, OK 73136

## **JOM Class Related Item Assistance**

**Parents & Students:** To apply for a class related item assistance, your student will need to be eligible to receive JOM services through our program. The application will need to be completed and returned; in person or by email, fax or mail to the any of the addresses above.

Semester: Fall 22 Spring 23			Stud	Students may only apply once/academic year.				
Student Name:				Date:				
School:			ID #:		Grade	e:		
Student Email:				Student Phone #:				
Parent/Guardian Na	me:							
				Parent Phone #:				
I hereby certify that all of t year for services provided for assistance.								
Parent/Guardian Sig	arent/Guardian Signature Date		Stud	Student Signature		Date		
Class Related Item: Name of Class:				Teacher's Nar	ne:			
Name of Store:								
Address of Store:								
Store's phone numbe	r:		Does the	e store accept Pu	Irchase Orders?	Yes 🗌	No 🗌	
ltem		Description of It	em	Quantity		Price		
You must attach your c	lass schedu	e. Class Schedul	e attached? Y		unt allowed is \$75 ]	5/student/	'semester	
The teacher of the class verify and approve what the second secon			ign in order to	confirm student's	enrollment in th	e class and	d to	
Teacher's Signature		Date		Teacher's emai	I			
Return this form to:	Email to	merican Studer : <u>aglarney@okc</u> stions call: 405-	<u>ps.org</u> Fa	D Box 36609, OK x to: 405-587-14				