



Bureau of Indian Education-NN Navajo Central  
**OJO ENCINO DAY SCHOOL**  
 HCR 79, BOX 7, CUBA, NM 87013  
 Phone: (505) 731-2333 Fax: (505) 731-2361  
**School Year 2023 -2024**



Returning Student

New Student

Grade

**IDENTIFICATION:**

**Please Print All Information**

Name of Student: \_\_\_\_\_

\_\_\_\_\_ (Last Name)

\_\_\_\_\_ (First Name)

\_\_\_\_\_ (Middle Name)

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Gender :

Male

Female

Physical Address: \_\_\_\_\_

Date of Birth: \_\_\_\_/\_\_\_\_/\_\_\_\_

Place of Birth: \_\_\_\_\_

Enrollment Number (CIB) \_\_\_\_\_  
Blood \_\_\_\_\_

Degree of \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_

Chapter \_\_\_\_\_

Affiliation: \_\_\_\_\_

Is your child receiving Special Education Services:

Yes (If Yes, Please provide copy of IEP)

No

Language Spoken at Home:

Navajo

English

Language spoken by student:

Navajo

English

With whom does the student live with:

Both Parents

Mother

Father

Other \_\_\_\_\_

**Natural/Legal Parent Information:**

Father/Guardian Name: \_\_\_\_\_

Mother/Guardian Name: \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_

Tribal Affiliation: \_\_\_\_\_

Enrollment Number: \_\_\_\_\_

Enrollment Number: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Physical Location: \_\_\_\_\_

Physical Location: \_\_\_\_\_

Home/Cell Phone#: \_\_\_\_\_

Home/Cell Phone#: \_\_\_\_\_

Work#: \_\_\_\_\_

Work#: \_\_\_\_\_

Email Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

**\*PLEASE:** Keep your phone number updated:

**STUDENT PREVIOUSLY ATTENDED SCHOOL (If OEDS, leave it blank)**

School Name: \_\_\_\_\_ Grade Completed: \_\_\_\_\_

Address/ City/ State: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

School Name: \_\_\_\_\_ Grade Completed: \_\_\_\_\_

Address/ City/ State: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Reason for Leaving: \_\_\_\_\_

Has the student ever been removed or is the student in the process of being removed from previous school due to disciplinary action?  Yes  No

I / We are legally responsible for this student and hereby apply for his/her admission to Ojo Encino Day School. I understand that additional information may be required by the school before this student is enrolled: \* **BIRTH CERTIFICATION**, \* **CERTIFICATE OF INDIAN BLOOD (CIB)**, \***CURRENT COMPUTERIZED IMMUNIZATION RECORD IS REQUIRED.**

I recognize that this a public document and the falsification of the information on this document may constitute violation of the criminal law. I further hereby certify the information contained herein is true and correct. I understand the any legal update of the information of this enrollment is my/our responsibility.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

**SCHOOL OFFICAL USE ONLY**

NASIS ID#: \_\_\_\_\_

STATE ID#: \_\_\_\_\_

Birth Certification on File:

CIB on File:

Current Immunization Received:

I certify that the above name student is enrolled member with the Navajo Tribal Indian Census as being of:

\_\_\_\_\_ Degree of Indian Blood \_\_\_\_\_ Enrollment/Census Number: \_\_\_\_\_ Agency

APPROVAL OF SCHOOL APPLICATION:

Approved

Not Approved

\_\_\_\_\_  
Signature of Principal or Registrar

\_\_\_\_\_  
Date