# 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 Expected Graduation Year\_\_\_\_\_\_\_ Name of School \_\_\_\_\_\_\_\_\_\_\_\_\_ District Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
**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:

Full Name Physical 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 evidence, such as birth certificate(s) documenting lineage back to the Tribal member, Tribal certificate letter, Certificate Degree of Indian Blood “CDIB”*). Do not provide social security cards. Description \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# 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.

Helpful resources to consider using:

Federally Recognized Tribe: [*https://www.federalregister.gov/d/2023-17195*](https://www.federalregister.gov/d/2023-17195)

State Recognized Tribe: [*https://www.ncsl.org/quad-caucus/state-committees-and-commissions-on-indian-affairs*](https://www.ncsl.org/quad-caucus/state-committees-and-commissions-on-indian-affairs)

Member of an Indian Group: [*https://www.govinfo.gov/content/pkg/BILLS-103hr6ih/html/BILLS-103hr6ih.htm*](https://www.govinfo.gov/content/pkg/BILLS-103hr6ih/html/BILLS-103hr6ih.htm)

**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