

Pawnee Nation Education Division education@pawneenation.org P.O. Box 470 Pawnee, Oklahoma 74058- Phone: 918-762-3227

Grade for 2024-2025: **Student Information** Full Name: Male:_____ Female:____ Address: PO Box/ Street Name City, State Zip Code Telephone: Tribal Affiliation: **Tribal CDIB attached:** Yes: No: (Must be provided) Photo Release Pawnee Nation has my permission to use my photo publicly to promote this workshop. I understand that these images may be used on the Pawnee Nation website and social media. Yes: _____ No: ____ Signature: Date: ____ Survey Release form EDA will provide a survey at the end of the workshop. Your permission is requested to take the survey and have someone reach out 4 years after this workshop to take another survey. Yes: _____ No: ____