



Chilkoot Indian Association



Dear Applicant (s)

Thank you for your interest in joining the Chilkoot Indian Association. I have enclosed a complete enrollment packet for you to fill out and return. There are several important documents that must be included with your application for us to enroll you with the Tribe. Not included with this packet but available to you at our office are forms for getting your Certificate of Indian Blood from the BIA, Enrollment Form and Release of Enrollment Information from CCTHITA, and Request for Birth Record from the State of Alaska. If you require any of these forms please call the office 907-766-2323 and request them.

The following documents must be included with your application to be complete.

- The Chilkoot Indian Association Application must be completed as indicated
 - 1) Section I of the Application must be completed
 - 2) Section II of the Application must be completed to show at least one of the grandparents
 - 3) The application must be signed and dated
- A copy of your Birth Certificate
 - 1) If you are adopted we must have the altered and unaltered copies of your birth certificate
- A copy of your Certificate of Indian Blood or your CCTHITA Enrollment Card.

If any portion of your Application is incomplete the Application will be mailed back to you with an explanation of what additional information you must supply to determine enrollment.

Once we receive your completed enrollment application, the application will be presented and certified at the next Tribal Enrollment Committee meeting. The committee meets quarterly: February, May, August, and November.

If you have any questions about enrollment or need assistance with the forms please contact our office at 907-766-2323

Sincerely

Greg Stuckey
Enrollment Officer



Chilkoot Indian Association



SECTION I

Full Name: _____

Other Names Used (Maidcn, Etc.): _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Telephone: () _____ Social Security: ____/____/____

Birth date: _____ Birth Place: _____

Sex: _____ Natural Child: _____ Adopted Child: _____

Number of Children: _____

Names of Children: _____ Birth Date: _____

Names of Children: _____ Birth Date: _____

Names of Children: _____ Birth Date: _____

Names of Children: _____ Birth Date: _____

Names of Children: _____ Birth Date: _____

Native Blood Quantum: _____ Tribes _____

Clan: _____

Application filed by: Self: __ Parent: __ *Sponsor: _____

* Sponsor relationship to applicant and contact information: _____

One or more of the following documents are required for verification:

_____ Copy of Birth Certificate (Altered and Unaltered if an Adopted Child)

_____ A copy of your Certificate of Indian Blood or CCTHITA Enrollment Card

I hereby certify that all statements given for the purpose of enrolling with the Chilkoot Indian Association are correct and true.

Signature: _____ Sponsor Signature: _____

If any statements are proven to be misleading or false, penalties may include dis-enrollment
All enrollment information is confidential and shall remain confidential

SECTION II

*Please indicate if other parent is Non-Native, or if parent is not the natural parent(s).

Natural Father:

Roll No: _____
Birth Place: _____
Birthdate: _____
Tribe/Blood Degree: _____
Bro/Sis: _____

Father:

Blood Degree: _____ Roll No: _____
Mother (Maiden): _____
Blood Degree: _____ Roll No: _____

Father:

Blood Degree: _____ Roll No: _____
Mother (Maiden): _____

Blood Degree: _____ Roll No: _____

Father:

Blood Degree: _____ Roll No: _____
Mother (Maiden): _____

Blood Degree: _____ Roll No: _____

Father:

Blood Degree: _____ Roll No: _____
Mother (Maiden): _____

Blood Degree: _____ Roll No: _____

Father:

Blood Degree: _____ Roll No: _____
Mother (Maiden): _____

Blood Degree: _____ Roll No: _____

Applicant

Tribe: _____
Blood Degree: _____
Bro/Sis: _____

Natural Mother (Maiden):

Roll No: _____
Birth Place: _____
Birthdate: _____
Tribe/Blood Degree: _____
Bro/Sis: _____

Father:

Blood Degree: _____ Roll No: _____
Mother (Maiden): _____
Blood Degree: _____ Roll No: _____