



# The Powhatan Nation

## TRIBAL PREFERENCE FORM

I, \_\_\_\_\_, acknowledge that I am submitting my application for Tribal Preference with the Powhatan Nation (hereinafter referred to as the "Tribe"). I further affirm that I have tribal affiliation with The Powhatan Nation, and I affirm that this tribal preference form is true, complete, and accurate to the best of my knowledge.

I understand that, in accordance with the Powhatan Indian Civil Rights Act (ICRA) and the Tribe's Tribal Preference Policy, preference will be given to candidates who are enrolled members of the Powhatan Nation or other federally recognized tribes. I understand that the tribe will verify my tribal affiliation, and that any false statements or misrepresentations on this form may disqualify me from consideration for enrollment.

I hereby give up all right and claim any preference in membership that may be granted by any other tribe or organization, as well as any right or claim to any benefits, services, or resources provided by such tribes or organizations. I understand that the preference I am giving up will be transferred to the Powhatan Nation, and that the tribe will honor that transfer by giving preference to enrolled members of the Powhatan Nation or other federally recognized tribes.

I understand that this Tribal Preference Form is a required part of my membership application, and that failure to complete this form and/or provide accurate information may affect my eligibility for enrollment with the tribe.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Print Name: \_\_\_\_\_ Tribal Nation: \_\_\_\_\_

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

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Please submit this form with your membership application to be considered for tribal preference in enrollment with the tribe. Thank you.