TRIBAL CITIZENSHIP IS LIMITED TO TLINGIT AND/OR HAIDA BLOOD

Full legal name: _____ Suffix: _____

Other names used (maiden, etc.): _____

Mailing address: _____ City: _____ State: _____ Zip: _____

Physical address: _____ City: _____ State: _____ Zip: _____

Phone Number: ( ) _____ Email Address: _____

Date of Birth: ___ / ___ / ___ Soc Sec # _____ - ___ - _____ Gender: Male ☐ Female ☐

[1]Were you adopted? Yes or No (circle one)

If over the age 18; must be filed by applicant.

Application filed by: Self: _____ *Parent/Guardian: _____ *Sponsor: _____ (*Please complete below)

Name of person filing application: _____
Mailing address: _____
Relationship to applicant: _____

Notice of False or Misleading Information: If any statements are proven to be misleading or false, penalties may include delay, disenrollment, criminal, or civil charges filed against applicant or sponsor.

Privacy Act Notification: All enrollment information will remain confidential.

I hereby certify that the information given above is correct and true and used for the purpose of enrolling to be a tribal citizen of Central Council of Tlingit and Haida Indian Tribes of Alaska.

_____   _____
Signature   Date

For office use only
One or both of the following documents are required for verification:
_____ A Certified Copy of State Birth Certificate (Originals must be sent; Photocopies **NOT** accepted)
_____ Paternity Papers (Native Parent is not on the birth certificate. DNA tests **CANNOT** be accepted)
_____ Other Documents (Guardianship, Court, Etc.)

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[1] If adopted, must provide both Pre-Adopted and Amended Birth Certificates

Applicant must be of Tlingit or Haida descent - (Biologically) is the applicant biologically Tlingit or Haida? circle one Yes or No **Do not proceed if you answered no.**

Applicant: _____ Date of Birth: _____

Please read the following for your application to be complete -

- Original Certified Copy of Birth Certificate. (Long form birth certificate listing the parents)
- Photocopies of your birth certificate will not be accepted.
- Faxed or emailed applications and/or birth certificates will not be accepted.
- If Biological or Adopted section is left blank; your application will be returned for completion.
- If you are adopted, both the pre-adoptive and amended birth certificates are required.
- Family Tree must be completed to the best of your knowledge for both parents regardless of Native status.
- Voting Community selection is important. This process is key for our elections and programs.
- Please select a community listed below if you live outside one of our 21 communities.
- Signature and date are required to complete the application.
- If the applicant is 18 years of age or older, they must sign the application themself.
- If the applicant is a minor, the parent or legal guardian must sign the application on their behalf.
- **Legal guardian** must provide a copy of their guardianship paperwork with the application.
- Birth Certificate/s will be mailed back to you via certified mail, return receipt.

IF ANY PART OF THE APPLICATION IS INCOMPLETE, THE APPLICATION WILL BE RETURNED

Tlingit & Haida Tribal Enrollment Committee meets quarterly. Once application is complete, it will be processed and presented to the next Tribal Enrollment Meeting.

If you need assistance in completing your application(s), please call 907-463-7146 or email your questions to enrollment@ccthita-nsn.gov.

[2]VOTING COMMUNITY

If you live more than 100 miles outside of one of the communities below, please select one. All others will be automatically entered into their respective community

☐ Anchorage	☐ Juneau	☐ Metlakatla	☐ Sitka
☐ Angoon	☐ Kake	☐ Pelican	☐ Wrangell
☐ Craig	☐ Kasaan	☐ Petersburg	☐ Yakutat
☐ Haines	☐ Ketchikan	☐ San Francisco	
☐ Hoonah	☐ Klawock	☐ Saxman	
☐ Hydaburg	☐ Klukwan	☐ Seattle	

[2] Please select your residency community. If you live in a different community than your mailing address

Central Council

Tlingit and Haida

Indian Tribes of Alaska

Central Council of Tlingit and Haida Indian Tribes of Alaska
Program Compliance • Family Tree

Please add as much information as possible. Middle initials and dates of birth really help us when trying to identify citizens. Enrollment #'s help but are not required.

Applicant:
Siblings: _____

Biological Father:
DOB: _____
Enroll # (If known) _____
Fathers Siblings

Biological Mother:
DOB: _____
Enroll # (If known) _____
Mothers Siblings

Mother:
DOB: _____

Father:
DOB: _____

Enroll # (If known) _____

Father:
DOB: _____

Mother:
DOB: _____

Father:
DOB: _____

Mother:
DOB: _____

Mother:
DOB: _____

Father:
DOB: _____

Enroll # (If known) _____

Father:
DOB: _____

Mother:
DOB: _____

Father:
DOB: _____

Mother:
DOB: _____

Mother:
DOB: _____

Father:
DOB: _____

Enroll # (If known) _____

Father:
DOB: _____

Mother:
DOB: _____

Father:
DOB: _____

Mother:
DOB: _____

Where does your family originate from? _____

Your moiety: Eagle ☐ Raven ☐

Your Tlingit/Haida name: _____

What clan do you belong to? _____

DOB = Date of Birth
Enroll # = Enrollment Number