



NATIVE VILLAGE OF BARROW IÑUPIAT TRADITIONAL GOVERNMENT

ENROLLMENT APPLICATION

Applicant's Full Name: _____

Mailing Address: P.O. Box _____ Barrow, Alaska 99723 Phone No.(907) 852-_____

Physical Address: _____

If different: _____

Phone No. () _____ - _____

Reason: () Educational () Military () NSB Village: _____

() Medical () 13th Regional Tribe () Adopted

() Enrolled in other Tribe: _____

() Other: _____

DOB: ____ - ____ - ____ Place of Birth: _____ SSN: ____ - ____ - ____

Burden of Proof Check list (copies for submission):

- () Birth Certificate...NVB Constitutional requirement
- () Certificate of Indian Blood card...verify blood quantum
- () Arctic Slope Regional Corp. care...proof of Native group
- () Social Security Number...individual identification
- () Marriage Certificate...name change
- () Affidavit...adoption and/or name change
- () Relinquishment Form

Applicant's Signature: _____ Date: _____

Parent/Guardian's Signature: _____ Date: _____

(on behalf of a minor)

We encourage you to fill out the backside of the application for the documentation of your family lineage. Please be as complete/precise as you can.

DO NOT WRITE BELOW THIS LINE

TRIBAL COUNCIL ENROLLMENT COMMITTEE ACTION

() Approved () Rejected () Deferred

Justification: _____

Tribal Council Signatures: _____ Title: _____

_____ Title: _____

Date of Meeting: _____ Votes: FOR: _____ AGAINST: _____