



## Pueblo of Nambe-Tribal Enrollment Office

p: 505-455-4434 f: 505-455-2038 15A NP 102 West, Santa Fe, New Mexico 87506

### Tribal Enrollment Application Check List

Prior to returning this Enrollment Packet to the Enrollment Office, these procedures are to be completed

- 1. Complete the **TRIBAL ENROLLMENT APPLICATION**. When filling out the enrollment application, be sure to fill out every line and question. Print clearly in ink only. Please make sure the application is signed, dated and completed. We do not accept incomplete applications~ it will be returned to you.
- 2. If the name on the application differs from the **BIRTH NAME**, please provide documentation of name change with the application i.e. Marriage License, Divorce Decree or Adoption Papers.
- 3. Submit an **ORIGINAL STATE CERTIFIED BIRTH CERTIFICATE** to be copied. Hospital, county, city, commonwealth, and parish birth certificates will not be accepted. The birth certificate must show the full name of the parent(s) through whom eligibility is claimed. If the parent, with whom eligibility is claimed, is not listed on the birth certificate please include any DNA results, affidavits of lineage, or adoption papers. If the next enrolled family member is a grandparent, great-grandparent, etc. we will need a copy of the family member's birth certificate or affidavit of lineage to link the applicant to that person.
- 4. **ADDRESS:** List both the address where the applicant's mail is actually received and physical address where the applicant resides. These addresses will not be changed unless so advised by the applicant or, if a minor, by the applicant's parent, guardian or sponsor. Address changes must be in writing on the Information Update form and turned into the Enrollment Office.
- 5. Complete the attached **FAMILY TREE**. This information pertains to the applicant's genealogy on both sides of his/her family.
- 6. **POSSESSION OF INDIAN BLOOD:** If the applicant possesses blood of any other Federally Recognized Tribe, please be sure to list **ALL** tribes on the application. We do **NOT** allow dual enrollment and a verification must be sent to the other tribes to ensure they are **NOT** enrolled elsewhere. If you do not list the other tribes it can slow the application process.
- 7. If the applicant is adopted, please submit the **FINAL DECREE OF ADOPTION** when applying.
- 8. Complete the **SPOUSE INFORMATION**. This information pertains to the applicants spouse.
- 9. Complete **CERTIFICATION** by signing and dating the Tribal Enrollment Application.
- 10. Complete the **CONSENT FOR RELEASE OF INFORMATION** form.

**PLEASE BE CERTAIN** all documents have been completed and signed **BEFORE** you submit them to the **Enrollment Office.**

**APPLICATION WILL BE RETURNED TO YOU IF IT IS INCOMPLETE!**

*All information submitted to the Enrollment Office is **CONFIDENTIAL**. No information will be given to anyone other than the applicant unless proper documentation is provided.*



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### Tribal Enrollment Application

Applicants Full Name: \_\_\_\_\_ Suffix (Circle One):

Maiden, Indian, or Other Name by Which Known: \_\_\_\_\_ Jr. Sr. I II III

Date of Birth: \_\_\_\_\_ Gender:  F  M Previous Enrollment #'s: \_\_\_\_\_

#### Required Documents

Check one and attach:

- Official State Issued Birth Certificate  DNA Results  Affidavit of Lineage

Resides within the Pueblo of Nambe  YES  NO

Mailing Address: \_\_\_\_\_ Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_ (Work) \_\_\_\_\_

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

YES  NO Completed attached Family Tree?

YES  NO Has applicant ever been enrolled or are they enrolled with another tribe?

If YES, what tribe? \_\_\_\_\_

YES  NO Has the applicant ever relinquished their rights with another tribe?

If YES, please attach proof of Relinquishment or Disenrollment.

YES  NO Married or living with someone?  Non-Tribal  Tribal Member

If YES, Name: \_\_\_\_\_ and Tribal Affiliation: \_\_\_\_\_

### Certification

I hereby certify that the information provided on this membership application is true and accurate. I further understand that providing false information to deliberately obtain tribal membership can and will result in immediate rejection of application, and immediate removal from tribal membership (if enrolled).

Applicant Signature: \_\_\_\_\_ Date Completed: \_\_\_\_\_

If completing for a minor (under 18): Name: \_\_\_\_\_

Select One:  Parent  Custodian  Legal Guardian

Parent/Guardian Signature: \_\_\_\_\_ Date Completed: \_\_\_\_\_



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### Consent for Release of Information

I, \_\_\_\_\_ being of legal age of eighteen (18) years of age or older, voluntarily give my consent to release the following information or records about myself and/or child to the Pueblo of Nambe Enrollment Office

- Enrollment Information on myself.
- Enrollment information on my minor child (as a custodial parent or guardian)

\_\_\_\_\_  
Print Name of Minor Child

By signing below, I certify that I am the individual to whom the information or records apply. I understand that by signing this consent form, it is an unconditional release of information to be used in manner so deemed appropriate by the Pueblo of Nambe Tribal Enrollment Office. The Pueblo of Nambe, the Tribal Enrollment Office, and its employees shall be released from any and all liability resulting from the initial disclosure and from any further disclosure beyond the intended recipient.

Applicant Signature: \_\_\_\_\_

Date Completed: \_\_\_\_\_

Printed Name: \_\_\_\_\_

This document is **INDEFINITE** and is for **ENROLLMENT PURPOSES ONLY**

**Pueblo of Nambe Family Tree  
Documentation**

Paternal Grandfather:
DOB:
Tribal Affiliation:
Degree of Blood:
Other Tribes/Degree:

Paternal Grandmother:
DOB:
Tribal Affiliation:
Degree of Blood:
Other Tribes/Degree:

Maternal Grandfather:
DOB:
Tribal Affiliation:
Degree of Blood:
Other Tribes/Degree:

Maternal Grandmother:
DOB:
Tribal Affiliation:
Degree of Blood:
Other Tribes/Degree:

Father:
DOB:
Tribal Affiliation:
Degree of Blood:
Other Tribes/Degree:

<b>Tribal Member</b>	
Name:	
DOB:	
Tribal Affiliation:	
Degree of Blood:	
Other Tribes/Degree:	

Mother:
DOB:
Tribal Affiliation:
Degree of Blood:
Other Tribes/Degree:

Childrens Name:
DOB:
Tribal Affiliation:
Degree of Blood:
Other Tribes/Degree:

Childrens Name:
DOB:
Tribal Affiliation:
Degree of Blood:
Other Tribes/Degree:

Childrens Name:
DOB:
Tribal Affiliation:
Degree of Blood:
Other Tribes/Degree:

Childrens Name:
DOB:
Tribal Affiliation:
Degree of Blood:
Other Tribes/Degree: