

SAULT STE. MARIE TRIBE OF CHIPPEWA INDIANS

P.O. Box 1628 Sault Ste. Marie, MI 49783

PLEASE TYPE OR PRINT

Applicant's full na	me					
Mailing Address_	(Last)		(First)	(Middle)	(Maiden)	
walling Address_		(Street, Route	or PO Box)			
(City)			(State)	(Zip Code)	(County)	
Birthdate			Social Secu	urity No.	Marital Status	
MONTH DAY	/ YEAR	☐ Female			☐ Single	
		L			☐ Married☐ Separated	i
Weight	Hair				□ Divorced	
Height Eyes		Pho	Phone No		☐ Widowed	
Citizenship	US	Canada		Other		
If you are enrolled	with any other Tr	ibe or organization, plea	se name			
		7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7				
Spouse's full name	e(Last)	(Fi	rst)	(M.I.)	(Maide	n)
Address						
		(If same a	s above, write same)			
ls spouse enrolled	I with a Tribe or o	rganization, please nam	e:			
	-	home: (attach birth certi	ne: (attach birth certificates for each child)		IS THIS YOUR	
NAME		SOCIAL SECURITY	NO. SEX	DATÉ OF BIRTH	BIOLOGICAL CF	HLD?
					YES	NC
					YES	NC
and the state of t					YES	NC
			·		YES	NC
					YES	NC
					YES	NC
<u> </u>					YES	NC
					YES	NC
ARE ANY OF YOUR CHIDLREN ENROLLED WITH ANOTHER TRIBE OR BAND IN NORTH AMERICA?					YES	NC
		THER TRIBE OR BAND:				
NAME OF TRIPE OR	BAND.					
		COGNIZED?YES		· · · · · · · · · · · · · · · · · · ·		

In executing the foregoing application and making the statements therein set forth and attached thereto, I am fully aware of the provisions of section 1001 title 18, U.S.C, providing in effect that any person or persons in connection with "any matter with the jurisdiction of any department or agency of the United States who knowingly and willfully falsifies, or covers up by any trick, scheme or misrepresentation, or makes or uses any false writing or document, knowing the same to contain any false, fictitious or fraudulent statement or entry, shall be fined no more than \$10,000.00 or imprisoned not more than five years, or both."



Date