



NATIVE VILLAGE OF  
**FALSE PASS**

## TRIBAL ENROLLMENT APPLICATION

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

SOCIAL SECURITY # \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

I believe I am eligible to be a member of the False Pass Tribe for one of the reasons:

\_\_\_\_\_ Biological descendent of an Isanotski Corporation shareholder.  
Shareholder # \_\_\_\_\_ (If known)

\_\_\_\_\_ Eligible to be an adopted member as a dependent of another member.

\_\_\_\_\_ Substantially affiliated through extended periods of residency, family ties, or other factors as to be considered members of the village by common community knowledge, as determined by the Council.

\_\_\_\_\_ Alaska Native descent who physically resided in False Pass for at least one year and intends to remain in the village.

If applying for membership as a biological descendent or as an adopted member, please complete the following:

Name of person on Shareholder's roll of membership: \_\_\_\_\_

Relationship: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Place of Birth: \_\_\_\_\_ ID Number: \_\_\_\_\_

I hereby swear under penalty of perjury that the information contained in this application is true and that the applicant is not currently enrolled in any other tribe.

\_\_\_\_ I HAVE INCLUDED THE REQUIRED LEGIBLE PHOTOCOPY OF A BIRTH CERTIFICATE, OR AFFIDAVIT OF PATERNITY, OR MARRIAGE CERTIFICATE OR OTHER PROOF OF RELATIONSHIP TO AN ENROLLED MEMBER.

\_\_\_\_\_  
Signature of Applicant

WITNESS #1: \_\_\_\_\_

\_\_\_\_\_  
Date

WITNESS #2: \_\_\_\_\_