Enrollment Application Checklist

Please be sure to check off and attach each item on this list before submission to the Bear River Enrollment Department. Incomplete applications will not be processed. If an item in the check list is not applicable please place an N/A instead of a check mark.

_____ Completed Bear River Application for Enrollment (Be sure to sign application)

_____ Certified Birth Certificate

_____ Copy of Social Security Card

_____ Marriage Certificates (Both the applicants and the parents)

_____ DNA results for children born to non-tribal member mothers

_____ Completed Family History Tree Chart
(Chart must list the ancestor whom enrollment rights are claimed)

_____ If enrolling under the 1911-1960 Rohnerville Rancheria Resident Descendant
Eligibility clause then include census data sheets

BEAR RIVER BAND of ROHNERVILLE RANCHERIA
266 KEISNER RD LOLETA, CA 95551-9707 PHONE 707-733-1900 FAX 707-733-7972

APPLICATION FOR ENROLLMENT

Name of Applicant: _____

Current Mailing Address:_____

Residence Address:_____

Home Phone:_____Work or Message Phone:_____

Date of Birth:_____ Place of Birth:_____

Sex: Male   Female   Social Security:_____

Please indicate the ancestor for the Plan of Distribution OR the ancestor who resided on the Rohnerville Rancheria between 1911 and 1960 through whom enrollment rights are claimed.

Circle one :   Plan of Distribution   1911-1960 Rohnerville Rancheria Resident

Name:_____
         Last   First   Middle
Relationship to you:_____

Is/was the applicant or any ancestor of the applicant enrolled with another Tribe?   Yes / No

If yes:_____ _____
             Name   Relationship

_____ _____
   Tribe, Band, Rancheria   Roll Number

Pursuant to the Constitution of the Bear River Band of Rohnerville Rancheria, to remain a member in the Rohnerville Rancheria, and to exercise all rights and benefits thereof, it is necessary that you file with the Tribal Council written confirmation from the Tribe you are enrolled with that you have relinquished your membership in such other Federally Recognized Indian Tribe.

NAME AND ADDRESS OF APPLICANTS PARENTS OR GUARDIAN

Mother:_____
             Last   First   Middle
Other names by which known:_____

Mailing Address:_____

Residence Address:_____

Date of Birth:_____ Place of Birth:_____

Date of Death:_____Place of Death:_____

Tribal Affiliation:_____Roll Number:_____

Father:_____
             Last   First   Middle
Other names by which known:_____

Mailing Address:_____

Residence Address:_____

Date of Birth:_____Place of Birth:_____

Date of Death:_____Place of Death:_____

Tribal Affiliation:_____Roll Number:_____

Guardian:_____
             Last   First   Middle
Other names by which known:_____

Mailing Address:_____

Residence Address:_____

Date of Birth:_____Place of Birth:_____

Date of Death:_____Place of Death:_____

Tribal Affiliation:_____Roll Number:_____
Name of Court:_____ City_____County_____State_____

As an applicant for membership in the Bear River Band of Rohnerville Rancheria please understand that the burden of proof lies on you when determining your eligibility for enrollment. It is your responsibility to provide all required documentation before your application will be considered complete. Your application will not be reviewed by the enrollment committee until all documentation has been received.

All applicants must submit the following documentation:

*Completed Enrollment Application

*Certified Birth Certificate

*Copy of Social Security Card

*Marriage Certificate (Both the applicants and the parents)

*Complete Family History Tree Chart (Both Indian and Non-Indian Families)

*DNA results for children born to non-tribal member mothers

*If enrolling under the 1911-1960 Rohnerville Rancheria Resident descendant clause please include census data sheets.

I swear, under the penalty of perjury that the information contained in this application and accompanying documents are true and correct to the best of my knowledge and belief. I also swear that I have supplied all relevant data that is intended to be submitted to the Bear River Band of Rohnerville Rancheria on the issue of enrollment.

_____   _____
Print Name of Applicant   Date

_____   _____
Signature of Applicant   Date