

APPLICATION FOR ENROLLMENT

FULL NAME: _____
MAIDEN NAME: _____
ADDRESS: _____
E-MAIL: _____
GENDER: MALE FEMALE

AGE: _____
DATE OF BIRTH: _____
PHONE: (____) _____-_____

OCCUPATION: _____

HIGHEST EDUCATION (Please check only one): Not Applicable - Child Some High School High School Diploma
 Some College Associate's Degree Bachelor's Degree Master's Degree Doctorate Degree Other _____

PLEASE LIST ANY AND ALL CERTIFICATIONS THAT YOU PRESENTLY HOLD AS WELL AS THE EXPIRATION DATE OF THE CERTIFICATION AND THE AGENCY/SCHOOL THAT YOU ARE CERTIFIED THROUGH: _____

ARE YOU PRESENTLY ENROLLED IN ANOTHER TRIBE? Yes No
IF YES, PLEASE STATE TRIBE'S NAME, ADDRESS, PHONE NUMBER, AND DATE YOU EXPECT TERMINATION OF ENROLLMENT IN FOREIGN TRIBE: _____

ADULT APPLICANT OATH

I hereby swear, or affirm, that I wish to be considered for enrollment into the Florida Tribe of Cherokee Indians as a By-Blood Cherokee citizen Non-Cherokee citizen and that I have read and understand the Constitution, statutes, by-laws and other legal documents of the tribe and that I agree to these terms and accept them wholeheartedly and without reservation. By my signature, I, hereby bear testament that all proof submitted is true, accurate, and correct to the best of my knowledge and belief. Further, I hereby swear, or affirm, that I will accept the Florida Tribe of Cherokee Indians as my only true and sovereign tribal body, herewith renouncing any previous tribal affiliations that I may have, and that I commit myself to the perpetuation of the goals and objectives of the Florida Tribe of Cherokee Indians.

Done on this ____ day of _____, 20 ____.

By: _____
Printed Name: _____

OATH OF PARENT/GUARDIAN

I _____, the Parent Legal Guardian, of _____, a minor child, hereby swear, or affirm, that I have full, legal authority to sign on behalf of the child (if legal guardian, please submit certified copy of court order with application) and that I hereby wish for the child applicant to be considered for enrollment into the Florida Tribe of Cherokee Indians as a By-Blood Cherokee citizen Non-Cherokee citizen. Acting solely on behalf of the child, I hereby state I have read and understand the Constitution, statutes, by-laws and other legal documents of the tribe and that I agree to these terms, on behalf of the child, and accept them wholeheartedly and without reservation. By my signature, I, as Parent Legal Guardian, of the child applicant, acting both in my legal capacity and on behalf of the child applicant, hereby bear testament that all proof submitted of the child applicant's claim is true, accurate and correct to the best of my knowledge and belief. Further, I hereby swear, or affirm, that I, and the child applicant, accepts the Florida Tribe of Cherokee Indians as the child applicant's only true and sovereign tribal body, herewith renouncing any previous tribal affiliations that the child applicant may have, and that (s)he commits himself/herself to the perpetuation of the goals and objectives of the Florida Tribe of Cherokee Indians.

Done on this ____ day of _____, 20 ____.

By: _____
Printed Name: _____

CONSTITUTIONALLY REQUIRED CONFIRMATION:

I, the child applicant cited above, hereby state that I turned 18 years of age on _____ and that I confirm and ratify this oath as per Article II, Section 8 of the Constitution of the Florida Tribe of Cherokee Indians.

Signature: _____ Date: _____

ELECTION OF CITIZENSHIP

THE APPLICANT HEREBY PETITIONS THE ENROLLMENT BOARD TO BE CONSIDERED FOR THE FOLLOWING TYPE OF CITIZENSHIP INTO THE FLORIDA TRIBE OF CHEROKEE INDIANS AS PER CITED SECTION OF THE CONSTITUTION OF THE FLORIDA TRIBE OF CHEROKEE INDIANS (Please check only one):

- Citizenship as Cherokee By-Blood With No Relatives Enrolled per Article II, Section 5 (See Option A)
- Citizenship as Cherokee By-Blood Using Compounded Genealogy per Article II, Section 11 (See Option B)
- Citizenship as Non-Cherokee per Article II, Section 7 (See Option C)

Signature of Applicant/Parent/Guardian _____

Date _____

