



GWYJDJP
CHEROKEE NATION™

P.O. Box 948 • Tahlequah, OK 74465-0948 • (918) 453-5000

OrhGJ
Chad "Cornassel" Smith
Principal Chief

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Joe Grayson, Jr.
Deputy Principal Chief

INFORMATION:

To be eligible for Tribal Citizenship with the Cherokee Nation, you must be able to provide documents that connect you to an enrolled lineal ancestor, who is listed on the (DAWES ROLL) FINAL ROLLS OF CITIZENS AND FREEDMEN OF THE FIVE CIVILIZED TRIBES, Cherokee Nation with a blood degree. This roll was taken between 1899-1906 of Citizens and Freedmen residing in Indian Territory (now NE Oklahoma).

Many applicants do not qualify for Tribal Citizenship as their ancestors did not meet the enrollment requirements and were not enrolled. Certain requirements had to be met in order to be placed on the Dawes Roll. One example is the enrollee had to establish their permanent residence in NE Oklahoma before 1889 to meet the residential requirement.

Tribal Citizenship is issued through natural parents. In adoption cases, Tribal Citizenship must be proven through the BIOLOGICAL PARENT to the enrolled ancestor. A copy of the Final Decree of Adoption, and a State Certified, Full Image/Photocopy of the Birth Record must accompany the application. All information will remain confidential.

INSTRUCTIONS:

1. Complete the application in black/blue ink listing the closest lineal ancestor with a Tribal Citizenship number. If the applicant is a minor, the parent or legal guardian must sign the application.
2. Legal documents (signed by a judge) will need to be submitted with the application if the applicant is legally represented, such as court appointed guardian or under court ordered custody, such as divorce custody.
3. Attach the ORIGINAL STATE CERTIFIED FULL IMAGE/PHOTOCOPY OF THE BIRTH RECORD of the applicant and a copy of an immediate family member's Tribal Citizenship card.
4. If no one in the family has received Tribal Citizenship, attach ORIGINAL STATE CERTIFIED DOCUMENTS (BIRTH/DEATH) CERTIFICATES beginning with the applicant back to the enrollee.
5. Birth/Death records must be signed by the State Registrar, bearing the State Seal and State File Numbers. Please note that some States only issue a computer-generated record and a sworn statement affidavit may need to be signed by a parent. We cannot accept hospital, county certified or abstracts records. Originals can be brought in and a copy will be made for files (we do not keep the originals).
6. If your enrollee ancestor DIED after 1962, submit the ORIGINAL STATE CERTIFIED DEATH CERTIFICATE. This is needed to assist us in our review.
7. Should further information be needed to complete the application(s), we will contact you for specific documents.
8. Should we be unable to issue you Tribal Citizenship, a letter of explanation will be sent to you by restricted/certified mail. An Appeals Process will accompany the letter, should you not agree with our findings/decision.

RESEARCH REFERRAL:

If you need help with your research, please contact the Genealogy office at the Cherokee Heritage Center at (918) 456-6007 or at the following link: <http://www.cherokeeheritage.org/cherokeeheritage/genealogy.html>

You can access the "DAWES ROLLS" at: www.accessgenealogy.com/native/finalroll.php

Mail completed applications and original documents to:
**Cherokee Nation
Tribal Registration
P.O. Box 948
Tahlequah, OK 74465**

Questions: Please visit www.cherokee.org, email registration@cherokee.org or contact us at 1-800-256-0671, ext. 6980.

PROCESSING TIME MAY VARY



**CHEROKEE NATION
Registration Department**

P.O. Box 948
Tahlequah, OK 74465-0948
918-453-5000

**APPLICATION FOR CITIZENSHIP IN THE CHEROKEE NATION
(PLEASE PRINT IN BLACK/BLUE INK)**

LAST NAME FIRST MIDDLE MAIDEN
DATE OF BIRTH MALE FEMALE
 MO. DAY YEAR SOCIAL SECURITY NUMBER

PHYSICAL ADDRESS CITY STATE ZIP

MAILING ADDRESS CITY STATE ZIP

Have you registered as a citizen of the Cherokee Nation before? YES NO
When? _____ Registration Number? _____

MARK THE COUNTY YOU LIVE IN BELOW:

- | | | |
|-----------------------------------|-----------------------------------|---|
| <input type="checkbox"/> Adair | <input type="checkbox"/> Muskogee | <input type="checkbox"/> Wagoner |
| <input type="checkbox"/> Cherokee | <input type="checkbox"/> Nowata | <input type="checkbox"/> Washington |
| <input type="checkbox"/> Craig | <input type="checkbox"/> Ottawa | <input type="checkbox"/> All other Oklahoma |
| <input type="checkbox"/> Delaware | <input type="checkbox"/> Rogers | <input type="checkbox"/> Out of State |
| <input type="checkbox"/> Mayes | <input type="checkbox"/> Sequoyah | <input type="checkbox"/> Out of Country |
| <input type="checkbox"/> McIntosh | <input type="checkbox"/> Tulsa | |

Signature of Applicant (IN INK) Date of Signature
(All minor applicants must have their parent's/legal guardian's signature).

DO NOT WRITE BELOW THIS LINE

CHEROKEE REGISTRY NUMBER

APPROVED DISAPPROVED

REASON: _____

ANCESTOR CHART

Date: _____

- **Optional:** Please provide names of other family members who have received their Tribal Citizenship cards within the past five (5) years. This reference maybe helpful when processing your application. _____

Paternal Grandfather: CDIB () Yes
Roll # () No

 Date of Birth: _____
 Date of Death: _____

Paternal Great-Grandfather:
Roll # _____
 Date of Birth: _____ Death: _____
Paternal Great-Grandmother:
Roll # _____
 Date of Birth: _____ Death: _____

- **Please follow Indian bloodlines only.**
- **Please trace back to the nearest ancestor with a Tribal Citizenship number.**
- **Please use maiden names on all females.**

Father: CDIB () YES () NO
Roll # _____
 Date of Birth: _____
 Date of Death: _____

Paternal Grandmother: CDIB () Yes
Roll # () No

 Date of Birth: _____
 Date of Death: _____

Paternal Great-Grandfather:
Roll # _____
 Date of Birth: _____ Death: _____
Paternal Great-Grandmother:
Roll # _____
 Date of Birth: _____ Death: _____

Mother: CDIB () YES () NO
Roll # _____
 Date of Birth: _____
 Date of Death: _____

Maternal Grandfather: CDIB () Yes
Roll # () No

 Date of Birth: _____
 Date of Death: _____

Maternal Great-Grandfather:
Roll # _____
 Date of Birth: _____ Death: _____
Maternal Great-Grandmother:
Roll # _____
 Date of Birth: _____ Death: _____

Applicants Name & Place of Birth _____

Address _____

City and State _____

Maternal Grandmother: CDIB () Yes
Roll # () No

 Date of Birth: _____
 Date of Death: _____

Maternal Great-Grandfather:
Roll # _____
 Date of Birth: _____ Death: _____
Maternal Great-Grandmother:
Roll # _____
 Date of Birth: _____ Death: _____

PROCESSING TIME MAY VARY