Tribal Enrollment Checklist

Things to check before mailing in a CDIB and citizenship application

Certificate of Degree of Indian Blood (CDIB) Application:

	Fill out Certificate of Degree of Indian Blood application completely - Including requester's name, address, date of birth, parents' information, etc.
	\square Sign the second page of Certificate of Degree of Indian Blood Application
	Attach a state-issued long form copy of the applicant's birth certificate. Front and backside of the birth certificates are required if anything appears on the backside
	- County, hospital and city birth certificates are not accepted
	☐ Make sure Sworn Statement Affidavit is signed and notarized for both parents - If both parents are listed on birth certificate, both parents are required to sign the SSA. If either parent is deceased, a copy of the deceased parent's death certificate must be included.
Cit	tizenship/Voter Registration Application:
	☐ Select the appropriate box for the application (top right hand corner)
	☐ Complete the personal information area of the citizenship application - <i>Including maiden name if applicable, Social Security number, mailing address, etc.</i>
	☐ Make sure you provide accurate information regarding whether or not you possess blood of another tribe. If you are currently enrolled with another tribe, you must relinquish with that tribe to receive citizenship with the Chickasaw Nation
	☐ Attach a colored photograph that is no smaller than 1 ½ "by 1 ¼ " - We will accept passport, Polaroid or professional photographs
	☐ If you are 18 or older and would like to register to vote, choose the appropriate voting district. If you do not wish to register at this time please select the "Abstain from Voting" box in the top right hand corner
	☐ Sign the application as you would like it to be shown on your citizenship card. Please make sure the signature is legible. Provide a good daytime phone number and date the application

Please include an email address if applicable

Application for Citizenship in the Chickasaw Nation (Minor Application)

First name	Middle	Last	Suffix	Social Security r	Social Security number	
Mailing address (stree	et, box, route)	City	County	State	ZIP	
Physical address						
Primary phone no.	phone no. Email a			Secondary phone no.		
Birth date	Gender	Deç	gree of blood	Issuing agency		
Do you possess I	Indian blood of anothe	r tribe? If yes, what	tribe(s)?			
Do you wish to ha	ave your Social Secur	ity number printed on	your citizenship card?	□ Yes □ No		
Polaroid or profes	ssional photographs a	re appropriate). Phot	eed to attach a current ographs must be in color All minors will receive a	r and no smaller tha	an 1½" by 1¼". For	
			nstitution of the Chickasa roneous information can			
YOUR SIGNATURE (parent/legal guardian	REQUIRED n must sign for minors/ward		nship if other than applicant		Date	
			t the Chickasaw Nation ⁷ ct designation as an eligi			
OFFICE USE ON	======================================		=======================================		========	
	Staff initials		Identification numb	er	Date	
				Form no. 082	65 IS-SD Rev. 11/2016	