



Leech Lake Band of Ojibwe Office of Tribal Enrollment
190 Sailstar Drive NW • Cass Lake, MN 56633
Application For Enrollment - Leech Lake

Applicant

First Name	Middle	Last	Maiden
Address		City	State/Zip
Date of Birth Month Day Year	Place of Birth City		Place of Birth State
Social Security Number		Is the applicant and Enrolled Member of another Tribe? <input type="checkbox"/> Yes <input type="checkbox"/> No	
<i>Please note: If the applicant was not born in the United States, you must provide proof of citizenship.</i>		Is the applicant adopted? <input type="checkbox"/> Yes <input type="checkbox"/> No	

Biological Mother of Applicant

First Name		Last	
Middle		Maiden	
Physical Address	City	State	
		Zip	
Mailing Address	City	State	
		Zip	
Date of Birth	Social Security Number		
Is Mother an enrolled member of the Minnesota Chippewa Tribe? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, Mother's Reservation of Enrollment			
Mother's Enrollment Number	Mother's Degree of MCT Indian Blood		
If No, does Mother possess any MCT Indian Blood? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, state degree			
Name of Person MCT Indian Blood is derived from			
Does Mother have any other Indian Blood (outside of the Minnesota Chippewa Tribe)? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, what Tribe and State?			
What degree of Non MCT Blood does she possess?			

Biological Father of Applicant

First Name		Last	
Middle		Suffix (Sr., Jr., etc.)	
Physical Address	City	State	
		Zip	
Mailing Address	City	State	
		Zip	
Date of Birth	Social Security Number		
Is Father an enrolled member of the Minnesota Chippewa Tribe? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, Father's Reservation of Enrollment			
Father's Enrollment Number	Father's Degree of MCT Indian Blood		
If No, does Father possess any MCT Indian Blood? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, state degree			
Name of Person MCT Indian Blood is derived from			
Does Father have any other Indian Blood (outside of the Minnesota Chippewa Tribe)? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, what Tribe and State?			
What degree of Non MCT Blood does he possess?			

Specify Reservation of Enrollment for Application _____
Please note: All applicants will be enrolled under their Mother's Band, unless otherwise specified.

Signature of person filing application _____ Date _____

Relationship to Applicant _____ Telephone Number _____
(If guardian, attach proof)

AR #	Band ID	AR#	Band ID
ID #		ID #	
FAM #		FAM #	
Enr. Date	BQ	%	Enr. Date
			BQ
			%

Applicant MCT BQ _____ Percentage (%) _____ Band/Reservation _____



Faron Jackson, Sr., Chairman
Leonard Fineday, Secretary/Treasurer
Kyle Fairbanks, District I Representative
Steve White, District II Representative
LeRoy Staples Fairbanks III, District III Representative

Office of Tribal Enrollment

Application for Enrollment

INSTRUCTIONS

1. Complete the entire application page.
2. Attach the applicants **CERTIFIED BIRTH CERTIFICATE** with the full name of the father and the full name (*including maiden name*) of the mother.
3. Attach a copy of Proof of Citizenship (*if necessary*).
4. If the applicant is a member of another tribe, a relinquishment must be attached.
5. Mail the completed application and all the necessary attachments to:

Office of Tribal Enrollments
Leech Lake Band of Ojibwe
190 Sailstar Drive NW
Cass Lake, MN 5633

PRIVACY NOTICE

The Leech Lake Band of Ojibwe will use the information you provide to determine eligibility for enrollment with the Leech Lake Band of Ojibwe, Minnesota Chippewa Tribe. Providing Social Security Numbers is optional. If you do not provide other information, it may delay processing.

In the event the application is approved, information about members is used to update the Leech Lake Band and Minnesota Chippewa Tribe records.

WARNING

A false statement on any part of the application may result in a denial or loss of membership.

NOTICE

If the applicant's parents are both MCT members but affiliated with different Bands, the applicant will be enrolled under the Mother's Band unless otherwise specified.

QUESTIONS

Contact Office of Tribal Enrollments, Leech Lake Band of Ojibwe
Phone (218) 335-3601 or 1-800-442-3903 ext. 3601