

DESIGNATION OF AMERICAN INDIAN STATUS

CASE(S) NUMBER: _____

NAME OF CHILD/CHILDREN: _____

I, _____, parent/guardian of the above named minor child/children, hereby declare that:

() There are no known American Indian ancestry for this children/children.

() The maternal or paternal ancestry **includes** American Indian relatives. If so, please state the name and relationship of any persons claiming American Indian ancestry for this child/children, the name of the Tribe, and whether or not any relative is an enrolled member of that Tribe, if known.

Parent/Guardian signature