

The Muscogee (Creek) Nation of Oklahoma Citizenship Board

Director
Nathan Wilson

Managers
Andy Proctor
Allan Colbert Jr.



Board Members
Jason Nichols
Elizabeth Yahola
Clarence Johnson
Lea Ann Nix
Cecilia Wittman

CHECKLIST FOR CITIZENSHIP

(If the applicant's signature is in the box below, the checklist is required with your application)

- Must complete application for Citizenship (must list name(s) of ancestry and roll number)
- The application of an applicant, eighteen (18) years of age or older, must be signed by the applicant or by the applicant's parent/legal guardian. The application of an applicant less than eighteen (18) years of age shall be submitted only by the applicant's parent possessing legal custody of the minor or by his/her legal guardian and must be signed by the person submitting the application. (Legal Guardian(s) must submit the Certified Court records regarding guardianship)
- The applicant, parent or legal guardian who signs the application is required to enclose a color copy of his/her state ID or state Drivers License. (See True Copy of Original Form of Identification(s) form)
- Submit Original/Certified Copy of applicant's State Certified Full Image Birth Certificate.
- If submitting a Computer-Generated, Delayed, or Amended Birth and/or Death Certificate, the creek parent must complete the attached affidavit for the applicant; if additional documents are needed, one of the following documents may be requested: Social Security Numident (not to be confused with the social security number), School Record, or Probated Will which list the person as a heir.
- Submit the Original/Certified Copy of the State Certified Full Image Birth and/or Death Record(s) of your Non Enrolled ancestry(s) through whom you are tracing.
- When tracing back to the original enrollee you must submit a State Certified Death Certificate, which must list the creek parent(s) as listed on 1906 Dawes Roll.
- Copy of the Applicant's Social Security Card (Must show birth name or current Married/Legal Name) (See True Copy of Original Form of Identification(s) form)
- VETERANS:** Applicants, who are veterans, please submit your DD Form 214. For this document entitles a veteran a specialized Citizenship Card upon acceptance onto the Muscogee (Creek) Nation Tribal Roll (See True Copy of Original Form of Identification(s) form)
- Name Changes due to Marriage and/or Divorce** must be documented with an original/certified copy of the marriage license and/or divorce decree or possibly three forms of identification. Contact the Citizenship Office for accepted forms of Identification. **(See Back of Instructions for Legal Name Change)**
- ADOPTIONS:** Must submit certified copy of Petition and Final Decree of Adoption and must include a State Certified Full Image Birth Certificate (After Adoption).
- *For all applicants, please enclose a PASSPORT photo of yourself as well as a legible copy of your State Drivers License or State ID or (if under 18 years old) the State Drivers License or State ID of parent/legal guardian. (Photo Criteria: color, 2"x2", white background; for additional passport photo requirements check website: travel.State.Gov) (NO Polaroid or Professional Photos)
- ***Applicant's signature is required in the box if passport photo is submitted. Children that can sign on their own must do so. Children who can't sign on their own must have parent/legal guardian sign the parent/ legal guardian's name followed by a hyphen "-" and their relationship to the child. (THIS SIGNATURE WILL BE PLACED ON THE CITIZENSHIP CARD WITH PHOTO)**

APPLICANT'S SIGNATURE CANNOT TOUCH THE LINES

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INSTRUCTIONS

To insure your citizenship application is processed in a timely manner, please follow all instructions carefully. Any deviation from these instructions will delay your membership.

- 1) Complete the application for citizenship. List the name(s) of your ancestor(s) & roll number(s) from the Index and Final Rolls of Citizens of The Five Civilized Tribes.
- 2) The applicant will need to be prepared to update the last enrolled member(s)' file(s) from their direct lineage at the discretion of the Director/Manager or his/her designees.
- 3) Attach your Original **STATE CERTIFIED, FULL IMAGE OF THE ORIGINAL BIRTH RECORD**. This document will be signed by the State Registrar, embossed with the State Seal and must list the state file number. All originals will be returned after they are reviewed.
 - 3)i. If you are submitting a Computer-Generated, “**delayed**” or amended birth certificate and/or **death certificate**, you must include one supporting document that lists the parents' names, such as a social security abstract, a school record, or a probated will which lists the person as a heir.
 - 3)ii. **CAUTION:** Hospital, city and county birth certificates are **NOT** acceptable. Computer generated, abstracted or transcribed birth certificates are **NOT** acceptable. You will need to order the record directly from the State Vital Statistics Office and specifically request a **STATE CERTIFIED, FULL IMAGE OF THE ORIGINAL BIRTH RECORD**. Photocopies are **NOT** accepted. All originals will be returned after they are reviewed.
- 4) Submit State Certified, full image of the original birth and/or death record(s) of your **NON-ENROLLED** ancestor(s) through whom you are tracing. Please review the **CAUTION** section above.
 - 4)i. If you provide a death record, it must list the Creek parent(s) name. You will need to provide a supporting document for each death record. (See supporting document(s) above) (Ex: If your mother is Creek and is not enrolled, we need her birth record to connect you to the first enrolled member.)
- 5) When tracing back to the original enrollee, you must submit a **State Certified Full Image** of the original Birth and/or Death Certificate(s), which must list the Creek Parent as listed on the Index and Final Rolls of Citizens of the Five Civilized Tribes. Again, all originals will be returned after they are reviewed.
- 6) **ADOPTION:** Applicant(s) are eligible for Citizenship only through the **Biological Creek Parent(s)**. A certified copy of the Petition for Adoption and the Final Decree of Adoption must accompany the application for Citizenship, as well as the **STATE CERTIFIED, FULL IMAGE OF THE BIRTH RECORD**. All information will remain **CONFIDENTIAL**.
- 7) Please send the completed applications with the required documents to: **MUSCOGEE (CREEK) NATION
ATTN: CITIZENSHIP BOARD
PO BOX 580
OKMULGEE, OK 74447**

(SEE OTHER SIDE FOR ADDITIONAL INFORMATION)

ATTENTION

- THE TIMEFRAME FOR THE ENROLLMENT PROCESS OF YOUR CITIZENSHIP APPLICATION VARIES DUE TO THE APPLICATIONS BEING PROCESSED ON A CASE BY CASE BASIS.
- **IN THE REVIEW PROCESS OF THE APPLICANT'S DOCUMENTATION AND DIRECT LINEAGE, PLEASE BE AWARE THAT ADDITIONAL DOCUMENTATION MAY OR MAY NOT BE REQUESTED AFTER THE INFORMATION IS REVIEWED.**

REMEMBER: All incomplete applications will be returned. If other documents are needed you will be contacted.

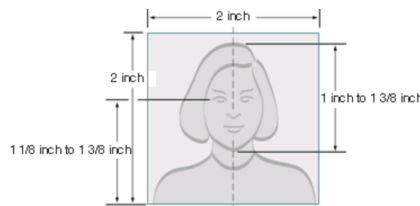
Please be sure to fill out blanks to the best of your knowledge, being careful to submit maiden names and previous names - this will help us research your records much faster.

Do not forget a color copy of your social security card - your application will be incomplete and returned.

Legal Name Changes must be documented with the original/certified copy of the Order of Name Change court record. The court record must show that it was filed with a County Court and is signed by the judge.

For additional requirements about Passport photos, please review this website: <http://travel.state.gov/content/passports/english/passports/photos/photos.html>

PASSPORT PHOTO COMPOSITION



REMEMBER: Photocopies of birth or death certificates will not be accepted.

The application of an applicant eighteen (18) years of age or older must be signed by the applicant or by the applicant's legal guardian. The application of an applicant less than eighteen (18) years of age shall be submitted only by the applicant's parent possessing legal custody of the minor or by his legal guardian and must be signed by the person submitting the application.

Please help the Citizenship Office update deceased citizen's information, if your creek parent(s) or creek grandparent(s) are deceased please submit the death certificate of the citizen or call the Citizenship office with this information so a death notice may be completed for the deceased citizen.

If you move during enrollment process, please notify this office at 1-800-482-1979 or (918) 732-7941. MVTO!



The Muscogee (Creek) Nation Citizenship Application



Return Application to:
Citizenship Office
P.O. Box 580
Okmulgee, OK 74447

Contact Information:
(918) 732-7941
1 (800) 482-1979

The Citizenship Board office is governed by a Citizenship Board consisting of five members. This office provides services to citizens of the Muscogee (Creek) Nation of Oklahoma or to potential citizens in giving direction or assisting in the lineage verification process of the Muscogee (Creek) people. The mission of this office is to verify the lineage of descendants of persons listed on the 1906 Dawes Roll of Creek by Blood. In doing so, research is involved in the whole aspect of attaining citizenship. The criteria for citizenship is that you must be Creek by blood and trace back to a direct ancestor listed on the 1906 Dawes Roll by issuance of birth and/or death certificates.

(Please complete application with a black/blue pen.) (Unless stated otherwise, all blocks must be completed or it's an incomplete application)			
Name (First, Middle, Last, Maiden):			
Date of Birth:	S.S. #:	Sex: <input type="checkbox"/> Male <input type="checkbox"/> Female	
Is Applicant Adopted? <input type="checkbox"/> Yes <input type="checkbox"/> No	Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Widow <input type="checkbox"/> Separated	Veteran: <input type="checkbox"/> Yes - (See Checklist)	
If the applicant is 18 years or older, does the applicant want the Social Security Number visible on the Citizenship ID Card:			<input type="checkbox"/> Yes <input type="checkbox"/> No
Home Phone: () -		(Optional) Cell Phone: () -	
Email:			
Preferred Contact: <input type="checkbox"/> EMAIL <input type="checkbox"/> MAIL <input type="checkbox"/> PHONE			
Physical Address (NO P.O. BOX)			
Address:			
City:	State:	Zip Code:	County:
Mailing Address			
Same as Physical Address: <input type="checkbox"/> Yes <input type="checkbox"/> No	Address:		
City:	State:	Zip Code:	County:
Tribal Background			
Other Indian Blood: <input type="checkbox"/> Yes <input type="checkbox"/> No	If yes, list tribe(s):		

I HEREBY CERTIFY THAT THE STATEMENTS GIVEN FOR THE PURPOSE OF MUSCOGEE (CREEK) NATION ENROLLMENT ARE CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE. BY SIGNING THIS APPLICATION FOR CITIZENSHIP, I VERIFY THAT ALL INFORMATION PROVIDED IS TRUE AND CORRECT. UNDER MUSCOGEE (CREEK) NATION CODE ANNOTATED TITLE 14, SEC 2-817, IT IS UNLAWFUL FOR ANY INDIAN PERSON TO WILLFULLY, INTENTIONALLY, AND KNOWINGLY MAKE OR CAUSE TO BE MADE A FALSE APPLICATION TO THE MUSCOGEE (CREEK) NATION FOR THE PURPOSE OF OBTAINING TRIBAL MEMBERSHIP. AN INDIAN APPLICANT CONVICTED OF VIOLATING THIS SECTION SHALL BE GUILTY OF A MISDEMEANOR AND SHALL BE PUNISHED IN ACCORDANCE WITH PARAGRAPH 1 OF SUBSECTION B OF TITLE 14, SEC. 1-601.

SIGNATURE (Required): (Parents must sign for children under 18). Other persons may sign for a minor or disabled person if legal documentation is submitted.

PRINT NAME (Required): (Parents must sign for children under 18). Other persons may sign for a minor or disabled person if legal documentation is submitted.

LINEAGE CHART

(If one or both biological parent(s) are enrolled, complete the parent(s) information then STOP)

KEY:

Maternal - Mother's Side of the Family
Paternal - Father's Side of the Family

D.O.B.: Date of Birth
D.O.D.: Date of Death

S.S.#: Social Security Number

Parents

Mother:	D.O.B:	Tribe & Roll#:
S.S. #:	D.O.D:	
Father:	D.O.B:	Tribe & Roll#:
S.S. #:	D.O.D:	

Maternal Grandparents

MGMother:	D.O.B:	Tribe & Roll#:
S.S. #:	D.O.D:	
MGFather:	D.O.B:	Tribe & Roll#:
S.S. #:	D.O.D:	

Paternal Grandparents

PGMother:	D.O.B:	Tribe & Roll#:
S.S. #:	D.O.D:	
PGFather:	D.O.B:	Tribe & Roll#:
S.S. #:	D.O.D:	

FOR ADDITIONAL SPACE, PLEASE USE BACK OF THIS PAGE

OFFICE USE ONLY:

RECEIVED STAMP HERE	RECEIVED STAMP HERE	RECEIVED STAMP HERE
RECEIVED STAMP HERE	RECEIVED STAMP HERE	RECEIVED STAMP HERE

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NO DUAL ENROLLMENT

Members of the Muscogee (Creek) Nation who are of another American Indian Tribe must sign an oath saying they are not enrolled with another tribe.

I, _____, (print applicant's first-middle-last name)

as a citizen of the Muscogee (Creek) Nation, hereby swear (or affirm) that,

I am not enrolled and will not enroll as a citizen of any other federally recognized Indian Tribe, Nation Band Pueblo, Rancheria, or Alaska Native Village, or any other federally recognized Indian entity (except a tribal town of the Muscogee Nation), without first resigning my enrollment in the Muscogee (Creek) Nation, or without giving thirty (30) days written notice to the Citizenship Board of the Muscogee (Creek) Nation.

I further understand that a violation of this oath is punishable by not receiving tribal services.

Signature of Applicant

(Parent or legal guardian must sign if applicant is under 18 yrs. old)

Date: _____

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AUTHORIZATION FOR RELEASE OF INFORMATION

I, _____, (print applicant's first-middle-last name)

authorize the release of information requested by or from the Citizenship Board of the Muscogee (Creek) Nation. The requested information shall be used solely in the administration of citizenship related programs.

This release includes, but is not limited to, the following agencies:

Programs and Services of the Muscogee (Creek) Nation, Bureau of Indian Affairs,
Indian Health Services, School Authorities, local, state and federal agencies.

Signature of Applicant
(Parent or legal guardian must sign if applicant is under 18 yrs. old)

Date: _____

The above signature is by:

- Self
- Next-of-Kin
- Authorized Representative

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True Copy of Original Form of Identification(s)

Please check the box(es) that apply and attach the designated color-copy ID to this Document

STAND-ALONE PRIMARY FORM OF IDENTIFICATION	SECONDARY FORM OF IDENTIFICATION <i>(Original Birth Certificate Required)</i>	SECONDARY FORM OF IDENTIFICATION <i>(Original Birth Certificate Required)</i>
<input type="checkbox"/> State ID Card or Driver's License (No more than 3 months expired) <input type="checkbox"/> Oklahoma Self Defense Act License (Concealed/Open Carry License) (No More than 3 months expired) <input type="checkbox"/> United States Passport (No more than 3 months expired) <input type="checkbox"/> Out-of-State Drivers License <input type="checkbox"/> **Current Citizenship ID Card with Photo (No more than 3 months expired) <input type="checkbox"/> An identification document issued by the United States Armed Services (Issued by the Department of Defense); one of the following: <input type="checkbox"/> Military identification card <input type="checkbox"/> Military dependent identification card <p><small>** Identity must have been verified with acceptable identification and/or documentation with the MCN Citizenship Office</small></p>	<input type="checkbox"/> Any primary of identification, which is not used as the primary ID for a U.S. Citizen <input type="checkbox"/> For any person under the age of 18, an affidavit signed by the parent or legal guardian <input type="checkbox"/> Identification Document issued by the one of the following: <input type="checkbox"/> Oklahoma public, private, or parochial secondary school <input type="checkbox"/> Oklahoma institution of higher education <input type="checkbox"/> Oklahoma technology center school <input type="checkbox"/> Oklahoma employer <input type="checkbox"/> Oklahoma gun permit <input type="checkbox"/> Pilot license <input type="checkbox"/> Oklahoma lifetime hunting or fishing license <input type="checkbox"/> Oklahoma voter identification card <input type="checkbox"/> Social Security card <input type="checkbox"/> Health insurance card <p style="text-align: right;"><small>Cont...</small></p>	<input type="checkbox"/> Oklahoma Medical Marijuana Adult/ Minor Patient Card <input type="checkbox"/> Motor vehicle registration or title <input type="checkbox"/> Marriage Certificate <input type="checkbox"/> Separation or divorce judgment <input type="checkbox"/> Professional degree, certificate, or license <input type="checkbox"/> Deed or title to property in Oklahoma, including a burial plot deed <input type="checkbox"/> Health, life, or home insurance policy issued to the applicant <input type="checkbox"/> Automobile insurance policy or security verification form issued to the applicant <input type="checkbox"/> A valid U.S.D.O.T. health card, as required by 49 C.F.R. Part 391 <input type="checkbox"/> ** Digital photograph comparison, if a digital photograph is already on file with the MCN Citizenship Office <input type="checkbox"/> Military discharge (DD-214), unless specified not to be used for identification <p><small>** Identity must have been verified with acceptable identification and/or documentation with the MCN Citizenship Office</small></p>

I, _____, (the adult applicant or parent/legal guardian of the applicant)
(Print First Middle Last Name)

affirm that the identification checked above and attached is/are a true and complete copy of the document which it purports to represent.

Signature: _____

Date: _____

You must sign and date this form in front of a Notary Public.

NOTARY PUBLIC USE ONLY

State of _____

County of _____

Subscribed and sworn to before me this _____ day of _____, 20____.

NOTARY STAMP

Notary Public Signature

My Commission Expires: _____

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AFFIDAVIT OF MATERNITY

I, _____, (Born on: _____ and Place of Birth:
Print MOTHER'S Full Maiden Name **MOTHER'S Date of Birth**

_____) of lawful age, being first duly sworn, deposes and
MOTHER'S Place of Birth (State Only)

says as follows:

I hereby acknowledge I am the biological mother of _____,
Print CHILD'S Full Name

born on _____. The birth occurred in the State of _____ and
CHILD'S Date of Birth

NO ADOPTION has taken place. I understand if I submit any false information, all rights and
privileges of citizenship in the Muscogee (Creek) Nation will be irrevocably removed.

Date

Biological Mother's Signature & Roll No.

You must sign and date this form in front of a notary public.

NOTARY PUBLIC USE ONLY

State of _____

County of _____

Subscribed and sworn to before me this _____ day of _____, 20 _____.

My commission expires:

Notary Public

Muscogee (Creek) Nation ~ Citizenship Office ~ P.O. Box 580 ~ Okmulgee, OK 74447
You may contact our office at 1-800-482-1979 or (918) 756-8700, ext. 7940/7941/7942/7943

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AFFIDAVIT OF PATERNITY

I, _____, (Born on: _____ and Place of Birth:
Print FATHER'S Full Name **FATHER'S Date of Birth**

_____) of lawful age, being first duly sworn, deposes and

FATHER'S Place of Birth (State Only)
says as follows:

I hereby acknowledge I am the biological father of _____,

Print CHILD'S Full Name
born on _____. The birth occurred in the State of _____ and
CHILD'S Date of Birth

NO ADOPTION has taken place. I understand if I submit any false information, all rights and
privileges of citizenship in the Muscogee (Creek) Nation will be irrevocably removed.

Date

Biological Father's Signature & Roll No.

You must sign and date this form in front of a notary public.

NOTARY PUBLIC USE ONLY

State of _____

County of _____

Subscribed and sworn to before me this _____ day of _____, 20 _____.

My commission expires:

Notary Public

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