

## Iipay Nation of Santa Ysabel Application for Enrollment

### Application Requirements

Completed applications must be submitted to the Enrollment Commission by **January 1<sup>st</sup> or July 1<sup>st</sup>** to qualify for the January 10<sup>th</sup> and July 10<sup>th</sup> enrollment period.

- Original applications will only be accepted (no faxes)
- Applications will not be accepted with correction tape, such as white out. Please cross out and initial any errors.

All applications must be completed in entirety, signed and dated. The following must be submitted with the application to be considered complete:

- 1) Original birth certificate, baptismal record or any other evidence that shows the applicant meets the requirements (*originals will be returned to applicant*)
- 2) Copy of Social Security card
- 3) State picture identification card (for adults only)
- 4) Family tree chart (attached) showing ancestors of Iipay Nation of Santa Ysabel through which eligibility is being claimed
- 5) Verification of blood degree for affiliated family members in which eligibility is being claimed
- 6) Current verification of non-enrollment from any and all affiliated tribes listed on application and family tree
  - Application review may be delayed if not received with application, pending the response time provided from said Tribe.

**Constitution of Iipay Nation of Santa Ysabel, Article III-Membership reads as follows:**

**Section 1. Membership Requirements:** The membership of the Nation shall consist of the following persons:

- a) All persons who are enrolled members of the Nation as of the date of the adoption of the Constitution, which shall constitute the base roll, and,
- b) All persons who are properly enrolled as members of the nation but are no longer enrolled for the sole purpose of allowing their lineal descendants to be eligible for membership in the Nation pursuant to section 1(d) below; and
- c) All persons who were properly enrolled as members of the Nation but are now deceased for the sole purpose of allowing their lineal descendants to be eligible for membership in the nation pursuant to section 1(d) below; and
- d) All lineal descendant of any person listed in subsection (a), (b), or (c) above; provided, such descendants possess at least one-eighth Indian blood from a federally recognized tribes located in the United States.

**Section 2. Dual Enrollment.** No person who is enrolled as a member of any other tribe shall become a member of the Nation. An adult who is enrolled as a member of another tribe and who is otherwise qualified to enroll in the Nation shall be permitted to enroll as a member of the nation upon proof of meeting the requirements for the relinquishment of membership in the other tribe; provided, that the adult person shall be permitted to apply for membership and become a member of the nation once his or her lifetime.

**Section 3 Enrollment Process.** Persons seeking membership in the nation may apply for the membership in the nation anytime in accordance with the membership law and acted by the nation. Applications for membership shall be approved or denied by the executive branch twice a year on January 10 and July 10 of each year. Persons denied membership shall be permitted to seek Judicial review exclusively in the judicial branch.

Iipay Nation of Santa Ysabel  
Enrollment Commission  
P.O. Box 435  
Santa Ysabel, CA 92070

**Iipay Nation of Santa Ysabel  
Application for Enrollment**

Full Legal Name:		
List all other names applicant has been known by:		
Date of Birth:	Social Security Number:	Gender: <input type="checkbox"/> M <input type="checkbox"/> F
Place of Birth (City, State):		
Marital Status: <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Divorced <input type="checkbox"/> Widowed		Veteran: <input type="checkbox"/> Yes <input type="checkbox"/> No

Living on the Santa Ysabel Reservation? <input type="checkbox"/> Yes <input type="checkbox"/> No	Tract: <input type="checkbox"/> 1 <input type="checkbox"/> 2 <input type="checkbox"/> 3
Physical Address:	Mailing Address:
Phone Number:	

Are you enrolled in any other Reservation?  Yes  No If yes, Name of Tribe:

List Immediate Family Members (Parents and Siblings):

Relationship	Name	Date of Birth	Enrollment Status <i>Enrolled / Descendant</i>	Reservation of Enrollment/Descendancy

The above information is true and correct to the best of my knowledge. I authorize the Iipay Nation of Santa Ysabel to verify my (my child's) enrollment with the affiliated Tribes listed on my application and family tree.

Signature: X	
Printed Name:	Date:
Relationship to Applicant:	Contact Number:

↓ Inter-Office Use Only ↓	
Total Santa Ysabel Blood:	Total Blood (All Tribes):
Application <input type="checkbox"/> Approved <input type="checkbox"/> Denied Reason for Denial:	
Signature: X	Enrollment Number:
Printed Chairperson Name:	Date:

# Iipay Nation of Santa Ysabel Application for Enrollment

**Enrollment Committee Only**  
 SY Blood Degree: \_\_\_\_\_  
 Total Blood Degree: \_\_\_\_\_

Father Blood Degree _____ Reservation _____ Enrollment # _____	GrandFather Blood Degree _____ Reservation _____ Enrollment # _____	G-Grandfather Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandfather Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandmother Blood Degree _____ Reservation _____ Enrollment # _____
Mother Blood Degree _____ Reservation _____ Enrollment # _____	Grandmother Blood Degree _____ Reservation _____ Enrollment # _____	G-Grandmother Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandfather Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandmother Blood Degree _____ Reservation _____ Enrollment # _____
	GrandFather Blood Degree _____ Reservation _____ Enrollment # _____	G-Grandfather Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandfather Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandmother Blood Degree _____ Reservation _____ Enrollment # _____
	Grandmother Blood Degree _____ Reservation _____ Enrollment # _____	G-Grandmother Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandfather Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandmother Blood Degree _____ Reservation _____ Enrollment # _____
	GrandFather Blood Degree _____ Reservation _____ Enrollment # _____	G-Grandfather Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandfather Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandmother Blood Degree _____ Reservation _____ Enrollment # _____
	Grandmother Blood Degree _____ Reservation _____ Enrollment # _____	G-Grandmother Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandfather Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandmother Blood Degree _____ Reservation _____ Enrollment # _____
	GrandFather Blood Degree _____ Reservation _____ Enrollment # _____	G-Grandfather Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandfather Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandmother Blood Degree _____ Reservation _____ Enrollment # _____
	Grandmother Blood Degree _____ Reservation _____ Enrollment # _____	G-Grandmother Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandfather Blood Degree _____ Reservation _____ Enrollment # _____	GG-Grandmother Blood Degree _____ Reservation _____ Enrollment # _____