



UNITED HOUMA NATION

20986 Hwy. 1
Golden Meadow, LA 70357
(985)475-6640
Fax (985)475-7109

Dear Applicant:

Attached is the official Application for Enrollment with the United Houma Nation (UHN). **Please be aware that effective September 1, 2007 this application must be used to apply for membership and applicants will be required to pay a \$5.00 processing fee. Incomplete applications and applications without payment will be returned. You may pay with cash if hand-delivering to the above address; when mailing, send check or money order made payable to United Houma Nation.**

In addition to the completed "Application for Enrollment" form, copies of several documents must be included in order for your membership application to be processed. Use the checklist below to determine if your enrollment application is complete.

- _____ A complete and signed "Application for Enrollment"
- _____ A completed "Ancestry Chart"
- _____ A completed "Individual History Chart"
- _____ A copy of the applicant's birth certificate (a birth card or birth letter are not acceptable).
- _____ *If the applicant is adopted*, attach copies of his/her original birth records verifying biological parentage.
- _____ *If the applicant is adopted*, in foster care, or legally determined incompetent, attach copies of records indicating adoption and/or custodial guardianship.
- _____ *If the applicant is or was married*, attach copies of your marriage and/or divorce records.
- _____ *If the applicant is required to demonstrate significant community relationship*, attach a statement with a description of significant community relationship and supporting documents as needed.

*You are not required; however, you are urged to send copies of birth certificates, marriage & divorce records, and death certificates of already registered members to assist us in updating our files. Thank you in advance for helping us keep your family's records up-to-date.

When sending your supporting documents, we urge you to send copies and not the originals. We will not copy and return original documents to you.

Most of this application is self-explanatory; however, we have included some guidance for potential problems some applicants may experience and answers to some frequently asked questions.

FREQUENTLY ASKED QUESTIONS/APPLICATION GUIDANCE

What happens to my application once it is submitted?

Once an application is received by the Enrollment staff, the application date of receipt is documented and it will be reviewed to ensure that it is complete. If the application is incomplete, you will either be returned the application (if processing fee is not provided) or sent a letter reporting that your application cannot be processed because information is missing. You will be given the opportunity to submit the missing information to move your application further.

All complete applications must be reviewed by the Tribe's Enrollment Board to determine if the application is approved, denied or placed in the pending files. The Enrollment Board meets once a quarter and all applications are held until that time.

- If your application is approved you will receive your white enrollment card and number in the mail.
- If your application is denied you will receive a notice of denial with a reason why you did not meet the enrollment criteria.
- If your application is placed in the pending files, you will receive written notice with an explanation of why you are pending.

I'm a registered member, how much time do I have to register my child under the "presumptive membership criteria"?

In 2001, the UHN adopted a new Constitution that provided specific timelines of when registered parents need to enroll their children under what we call the "presumptive membership criteria." Registered parents have until their child's 5th birthday to register him/her with the UHN under this criterion. By registering within this time frame the Tribe presumes that the family is active in the tribal community thus meeting the criteria of "significant community relationships."

If a registered parent does not attempt to enroll their child before the child's 5th birth date, then that applicant will be treated as all other applicants and subject to demonstrate significant community relationship and being placed in the pending files until such that the membership rolls are opened.

Why would my application be pending?

In 1990, the UHN Membership Rolls were closed, except for newly born children of existing members, when the Tribe's petition for federal recognition was placed on active status. At this time, only children of existing members under the age of 5 are issued tribal roll numbers.

Although tribal roll numbers cannot be issued to all other applicants, the Enrollment staff has continued to accept them. Those pending applicants, who demonstrate direct lineal descendency to the UHN's list of known progenitors, are placed in a pending file referred to as "the After Deadline" file. These applicants are not

guaranteed membership; however, they are held for final processing until the membership rolls are opened and will be reviewed in date of receipt order.

What is the purpose of demonstrating significant community relationships?

When the new Constitution in 2001 was adopted, the membership criterion was clarified to indicate that a member of the UHN is not only someone who has direct lineal descendency to the Tribe, but also someone who has maintained significant ties to the tribal community. The application contains the definition of “significant community relationship” along with the documentation requirements.

What if the applicant’s father is of Houma Indian descent but his name does not appear on the birth certificate?

According to the UHN Enrollment Ordinance, if the applicant is claiming descendency through a parent whose name does not appear on the original birth certificate, or if such evidence is unavailable, the applicant has 3 options to verify paternity:

1. If the UHN Application for Enrollment is submitted within the first 6-months following the birth of the child, you may submit a copy of a legal affidavit (acknowledgment) of Paternity signed by both natural parents (a notarized statement will not be accepted).
2. If it has been more than six months since the birth of the child, you must submit an affidavit (acknowledgment) of Paternity signed by both natural parents along with legal documentation of DNA testing proving paternity. It is the responsibility of the parents to provide this documentation at their own expense. Mothers may wish to consider contacting their area Support Enforcement Office for assistance in obtaining testing. (LA Support Enforcement Call Center 1-800-256-4650)
3. If one or both of the natural parents are deceased, an affidavit can be executed on behalf of the applicant by an enrolled member of the applicant’s immediate family who can also provide legal documentation of DNA testing verifying family relations thus proving paternity.

Why do I need to send verification of adoption and natural parents?

According to the UHN Constitution, descendency requirements are based on the lineage of the natural parents. Without verification of the natural parents the application cannot be processed. In addition, if the applicant is a minor child, adoption records are necessary to verify who the custodial parents of the applicant are. All enrollment records including adoption verification are kept confidential.

THE UNITED HOUMA NATION, INC.
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APPLICATION FOR ENROLLMENT

This is the official application of the United Houma Nation. By completing this application, you are requesting official enrollment with the UHN. All information provided will remain confidential.

Name of Applicant: _____ Date of Birth: _____

Residence at time of birth: _____

List any other names the applicant is or has been known by: _____

Gender: Male Female Social Security No.: _____

Natural Father's Name: _____ Tribal No. _____

Natural Mother's Name(Maiden): _____ Tribal No. _____

Is the applicant above adopted: Yes No
If yes, provide name of adoptive parents and proof of adoption: _____

Physical Address: _____

Mailing Address: _____

Home Telephone No. _____ Alternate No. _____

Parish/County: _____ Last Grade Completed: _____

Is the applicant under the age of 18 or incapacitated, incompetent or otherwise in need of assistance?
 Yes No If yes, who is the legal guardian of the applicant?

Guardian Name: _____ Relationship: _____

Address: _____

Telephone No. _____ Alternate No. _____

Applicant is: Single Married Other Explain: _____

List spouse(s) and provide proof of marriage/divorce:

1 _____ 2 _____ 3 _____

SIGNIFICANT COMMUNITY RELATIONSHIP

1. Is the applicant under the age of 5? Yes No If no, skip to question #3

Any applicant age 5 or older must address Significant Community Relationship (see #3 below).

2. Is the applicant's natural mother currently a registered member of the UHN? Yes No
Is the applicant's natural father currently a registered member of the UHN? Yes No

If the applicant is under the age of 5 and at least 1 (one) natural parent is currently registered, you are not required to address significant community relationship and can skip to Applicant Assurances.

If neither parent is currently a registered member of the UHN, then you must address Significant Community Relationship (see #3 below).

3. In accordance with the UHN Constitution, you are required to demonstrate that you have a "significant community relationship" with the United Houma Nation (Article III, Section 1, (c)). As defined in the UHN Enrollment Ordinance:

"Significant community relationship" shall mean the recognition and acknowledgment by relatives of an applicant as a Houma Indian who has social, cultural and political ties with the Nation. Such recognition and acknowledgment shall be demonstrated for at least 5 (five) years preceding the filing of an application for enrollment by oral testimony from and documentary evidence submitted by at least 5 (five) immediate or extended family members and at least 3 (three) community members, all of whom are enrolled members of the Nation. Documentary evidence may include, but not be limited to, such documents as phone records, sign-in sheets to tribal and family social functions, a wedding guest book, a family reunion guest book, a funeral guest book, and such other documents.

Attach a description of your significant community relationship and attach supporting documents as needed.

APPLICANT ASSURANCES

Please initial each of the items below to indicate that you have read and understand these assurances. If you are unable to agree with the below assurances, then your application will not be processed and you may not be eligible for enrollment with the UHN.

Initial _____ I certify that I am not enrolled in any other Tribe

Initial _____ I certify that the information included in this application is true and correct

Signature of Applicant/Guardian if applicable

Date

For Office Use Only
Date Received: _____
Application Status: <input type="checkbox"/> Approved <input type="checkbox"/> Denied <input type="checkbox"/> Pending
Ancestor(s) on Base Roll Linked to Applicant: _____

Ancestry Chart

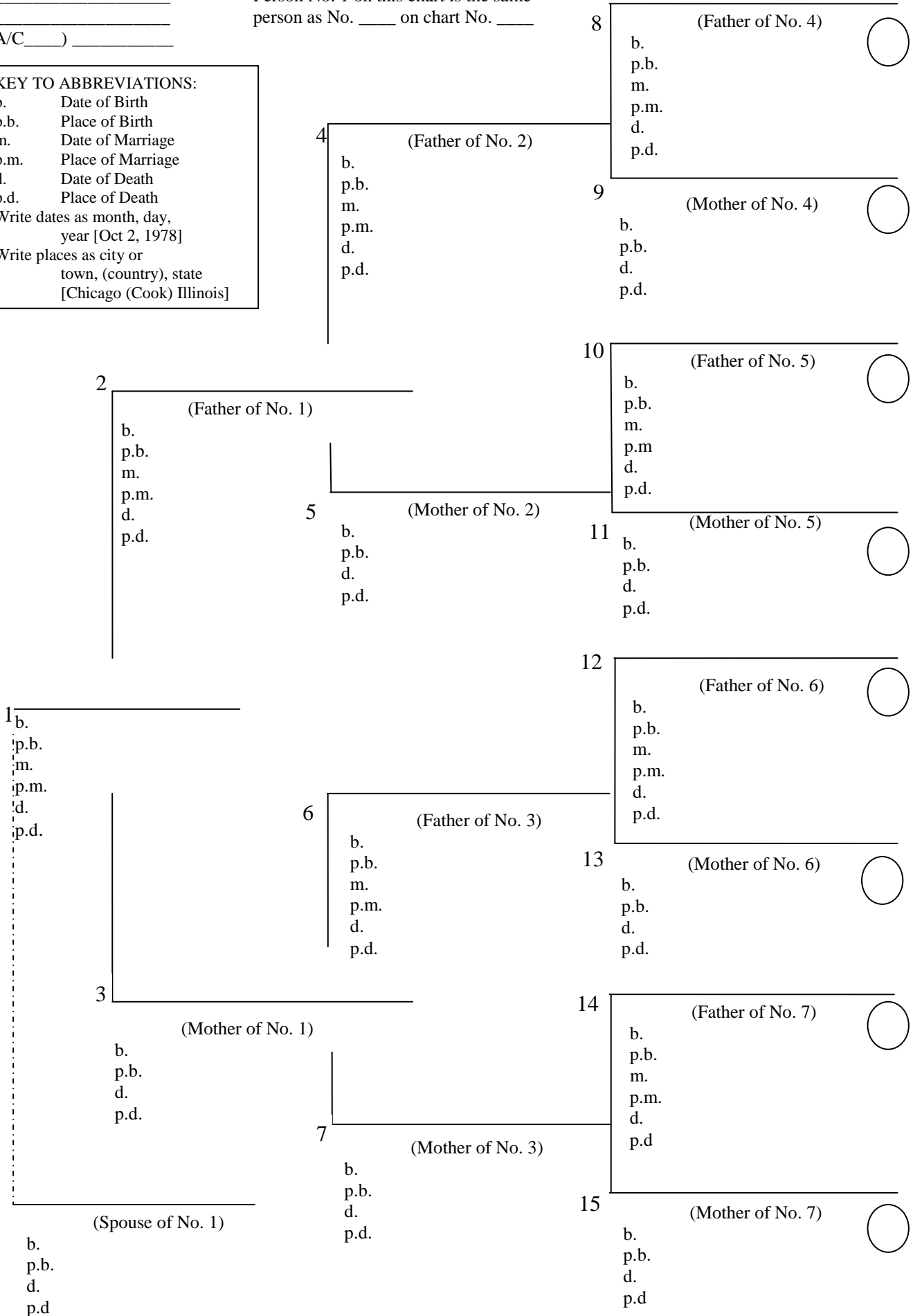
Name _____
 Address _____
 Phone (A/C____) _____

Person No. 1 on this chart is the same person as No. ____ on chart No. ____

KEY TO ABBREVIATIONS:

- b. Date of Birth
- p.b. Place of Birth
- m. Date of Marriage
- p.m. Place of Marriage
- d. Date of Death
- p.d. Place of Death
- Write dates as month, day, year [Oct 2, 1978]
- Write places as city or town, (country), state [Chicago (Cook) Illinois]

TO USE THIS FORM: Begin by entering the information about yourself at No. 1, your father at No. 2, his father at No. 4, and so on. If you need to trace your ancestry farther back than this form allows, simply enter the name of your relative which appears in the column numbered 8-15 in blank No. 1 on another chart and continue. Documentary evidence must be furnished.



b.
p.b.
d.
p.d.

b.
p.b.
d.
p.d.

INDIVIDUAL HISTORY CHART

(To be completed by each applicant)

APPLICANT'S NAME: _____

NAME OF APPLICANT'S WIFE/HUSBAND: (if wife, give maiden name)

NAME OF APPLICANT'S CHILDREN: (indicate whether child is male or female)

1. _____

2. _____

3. _____

4. _____

NAME OF APPLICANT'S FATHER: _____

NAME OF APPLICANT'S MOTHER: _____
(give mother's maiden name)

NAME OF APPLICANT'S BROTHERS:

1. _____

2. _____

3. _____

4. _____

NAME OF APPLICANT'S SISTERS:

1. _____

2. _____

3. _____

4. _____

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VERIFICATION OF SIGNIFICANT COMMUNITY RELATIONSHIP

Your application for tribal enrollment has been reviewed and in order for your application to be fully processed you must meet the UHN enrollment Constitutional requirement of “significant community relationship.” The UHN Enrollment Ordinance establishes that:

5 immediate and/or extended family members and 3 UHN community members, all who are registered UHN tribal members, acknowledge and recognize you as a Houma Indian who has social, cultural and political ties with the Nation.

This form is being provided to assist you in documenting this requirement.

UHN Applicant: _____

Address: _____

Date of Birth: _____

1) Family Member

I, _____ (UHN Tribal No. _____), am providing this written documentation, which shall serve as my oral testimony, on behalf of the above individual.

- ❖ I acknowledge that this individual is a Houma Indian who has social, cultural and political ties with the Nation.
- ❖ I certify that this statement is true and accurate to the best of my ability.

Signature Date

2) Family Member

I, _____ (UHN Tribal No. _____), am providing this written documentation, which shall serve as my oral testimony, on behalf of the above individual.

- ❖ I acknowledge that this individual is a Houma Indian who has social, cultural and political ties with the Nation.
- ❖ I certify that this statement is true and accurate to the best of my ability.

Signature Date

3) Family Member

I, _____ (UHN Tribal No. _____), am providing this written documentation, which shall serve as my oral testimony, on behalf of the above individual.

- ❖ I acknowledge that this individual is a Houma Indian who has social, cultural and political ties with the Nation.
- ❖ I certify that this statement is true and accurate to the best of my ability.

Signature Date

4) Family Member

I, _____ (UHN Tribal No. _____), am providing this written documentation, which shall serve as my oral testimony, on behalf of the above individual.

- ❖ I acknowledge that this individual is a Houma Indian who has social, cultural and political ties with the Nation.
- ❖ I certify that this statement is true and accurate to the best of my ability.

Signature Date

5) Family Member

I, _____ (UHN Tribal No. _____), am providing this written documentation, which shall serve as my oral testimony, on behalf of the above individual.

- ❖ I acknowledge that this individual is a Houma Indian who has social, cultural and political ties with the Nation.
- ❖ I certify that this statement is true and accurate to the best of my ability.

Signature Date

6) Community Member (Friend)

I, _____ (UHN Tribal No. _____), am providing this written documentation, which shall serve as my oral testimony, on behalf of the above individual.

- ❖ I acknowledge that this individual is a Houma Indian who has social, cultural and political ties with the Nation.
- ❖ I certify that this statement is true and accurate to the best of my ability.

Signature Date

7) Community Member (Friend)

I, _____ (UHN Tribal No. _____), am providing this written documentation, which shall serve as my oral testimony, on behalf of the above individual.

- ❖ I acknowledge that this individual is a Houma Indian who has social, cultural and political ties with the Nation.
- ❖ I certify that this statement is true and accurate to the best of my ability.

Signature

Date

8) Community Member (Friend)

I, _____ (UHN Tribal No. _____), am providing this written documentation, which shall serve as my oral testimony, on behalf of the above individual.

- ❖ I acknowledge that this individual is a Houma Indian who has social, cultural and political ties with the Nation.
- ❖ I certify that this statement is true and accurate to the best of my ability.

Signature

Date