Citizenship Transfer Process

The following is a step Process that must be completed before a Citizenship Transfer is completed:

1. Application for Thunderchild First Nation Citizenship must be filled out and handed in to the Thunderchild First Nation Registry Clerk. Applications are available at the Thunderchild First Nation Band Office.
2. You must provide a birth document with the parent(s) indicated. You can pick up an application at your Membership office. This documentation is required with the Transfer Process forms and Citizenship of the Thunderchild First Nation.
3. Registry Clerk ensures that the application is completed properly.
4. Registry Clerk presents it to the Thunderchild First Nation Citizenship Committee.
5. Citizenship Committee either denies or accepts the application.
6. If an application is accepted by the Citizenship Committee, the Registry Clerk prepares a Band Council Resolution and the Citizenship Portfolio Councillor will present these BCRs for ratification by Thunderchild First Nation Chief and Council.
7. Once an application is ratified by Chief and Council, the Registry Clerk will notify the applicant of the status of their application. The Registry Clerk will then contact the applicant’s home Band and request for a releasing BCR for the applicant. A releasing BCR is required only from those Bands that do have their own Membership Acts.
8. Once the releasing BCR is received from the other Band, the Registry Clerk will process the documents and submit to the Department of Indian and Northern Affairs in Prince Albert for input into the Indian Registry System in Ottawa.
9. Indian Affairs Headquarters in Ottawa complete the transfer by assigning a new Registry Number to the applicant and deleting their old number from the Registry System.
10. Headquarters then forwards the information to the District Office in Prince Albert who in turn advise the Registry Clerk in writing that the transfer is complete and advises Thunderchild of the new registry number.
11. Once the new registry number is received by the Thunderchild Registry Clerk, the Registry Clerk will contact the applicant in writing and advise them that their transfer is complete and notify them of their new registry number.
12. If you did not fill out and provide the proper information for number 1 & 2, your application will be returned to you and will be on hold until the proper information is provided.

PLEASE NOTE THAT YOUR APPLICATION FOR TRANSFER TO THE THUNDERCHILD FIRST NATION IS NOT OFFICIAL UNTIL YOU HAVE BEEN ASSIGNED A NEW REGISTRY NUMBER FROM THE HEADQUARTERS IN OTTAWA. THIS PROCESS MAY TAKE ANYWHERE FROM THREE TO SIX MONTHS.
THUNDERCHILD FIRST NATION
CITIZENSHIP APPLICATION

I, ________________, of ________________, in
(full name of applicant) (name of reserve)

the Province/Territory of ________________, Canada, hereby submit this
application for Citizenship in Thunderchild First Nation this ____ day of _____.
_____

PERSONAL INFORMATION:

Last Name: _______________________________________

Given Names: ______________________________________

(INAC) Indian Status Registry Number: _______________________

Date of Birth: _______________________________________

Sex: ______ Phone Number: _______________________

Current Address: _______________________________________

__________________________

FAMILY INFORMATION:

1. Spouse: (If Single, go to question #2)

   Name: _______________________________________

   Date of Birth: _______________________

   Address: _______________________________________

   Telephone Number: _______________________

   __________________________
2. (INAC) Indian Status Registration Number (if any): _________________

3. Your Natural Parents:
   
   Father
   Last Name: ______________________
   Given Names: ____________________
   Indian Status Registry # (if any): ______________________
   Address: ____________________________________________
   
   Mother:
   Last Name: ______________________
   Given Names: ____________________
   Indian Status Registry # (if any): ______________________
   Address: ____________________________________________

4. If you were adopted by a Thunderchild First Nation Citizenship Member(s):
   
   Father:
   Last Name: ______________________
   Given Names: ____________________
   Indian Status Registry #: _____________________________
   Address: ____________________________________________
   
   Mother:
   Last Name: ______________________
   Given Names: ____________________
   Indian Status Registry #: _____________________________
   Address: ____________________________________________
5. Your Natural Grandparents:

Maternal Grandparents:
Mother:
Last Name: ____________________________

Given Names: ____________________________

Indian Status Registry #: __________________

Address: ________________________________

Father:
Last Name: ____________________________

Given Names: ____________________________

Indian Status Registry #: __________________

Address: ________________________________

Paternal Grandparents:
Mother:
Last Name: ____________________________

Given Names: ____________________________

Indian Status Registry #: __________________

Address: ________________________________

Father:
Last Name: ____________________________

Given Names: ____________________________

Indian Status Registry #: __________________

Address: ________________________________

6. a) Describe your Lineage to Thunderchild First Nation:

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________
b) Briefly explain why you want to apply for Citizenship to Thunderchild First Nation:

SUPPORTING INFORMATION:

1. The following sources have data verifying my personal information. (place a check mark beside those sources which have your information).

   - Indian Affairs
   - Statistics Canada
   - Another Province
   - A State of the United States
   - Medical Services Canada
   - Province of Saskatchewan
   - Another Band/Tribe
   - Other

2. Name(s) of witnesses who will verify my information:

   Names:   Address:   Phone Number:

   ______________________________________
   ______________________________________
   ______________________________________
* This form must be Signed, dated and witnessed. It is important that you read this form carefully and fill it in correctly.

DECLARATION:

1. I hereby confirm and bear witness to the understanding that this application, if accepted by the Thunderchild First Nation means an automatic cancellation of my Membership in the ___________ Band. I state this because I understand that I cannot be a member of more than one Band at the same time. Therefore I confirm to the ___________ Band of my decision to transfer to the Thunderchild First Nation upon approval of this application and thereby renounce my Band Membership from the ___________ Band pending release from ___________ Band.

2. I hereby declare, and do solemnly swear, that the above information is true and represents the fact as I know them.

(Signature of Applicant)   (Witness)

(Date)   (Date)
Band Transfer Request
-Statement of Consent-

Date of Request: ______________________

Name: ________________________________

Date of Birth: _________________________

Registry Number: ______________________

This is to confirm that
I/my child/our Child: ___________________

Have/has been accepted as a Member of the _________ Band.

Please remove my/his/her name from the _________ Band and
the: _________ Band List/Registry Group.

Signature of Transferee

____________________________________

(Date)

* In case of a minor, both parents must sign the request for transfer.
BAND TRANSFER REQUEST

STATEMENT OF CONSENT

Full Name: ________________________________
(First) ________________________________  (Middle) ________________________________  (Last) ________________________________

Date of Birth: __________________________  Registration Number: __________________________

Address: __________________________________________________________

Telephone: __________________________________________________________

This is to confirm that:

☐ I

☐ My child/our child

Have/has been accepted as a member of the ________________________________ Band.

Please remove

☐ my name

☐ his/her name

From the ________________________________ Band List/Registry Group and

Please add

☐ my name

☐ his/her name

To the ________________________________ Band List/Registry Group.

Signature of Transferee(s): ____________________________________________

________________________________________

________________________________________

Date of Request: __________________________________________

**In cases where both parents of a minor are registered Indians and named in the Indian Register, they must each sign this statement of consent.

**If the minor reaches the age of majority within six (6) months following the transfer, he/she must also sign this statement of consent.

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