

2011 INDIAN ACT AMENDMENTS – GENDER EQUITY IN INDIAN REGISTRATION ACT APPLICATION FOR REGISTRATION AND SECURE CERTIFICATE OF INDIAN STATUS

General:

This application form is for individuals who meet ALL three of the following conditions to apply to be registered pursuant to the 2011 *Indian Act* amendments, *Gender Equity in Indian Registration Act*. Complete and submit if:

- the applicant's grandmother lost her entitlement to registration as a Status Indian as a result of marrying a non-Indian;
- one of the applicant's parents is/was entitled to be registered pursuant to subsection 6(2) of the Indian Act; AND
- the applicant, or one of his/her siblings of the same entitled to be registered parent, was born on or after September 4, 1951.

Note: If the applicant's grandparents were not married to each other before April 17, 1985 and the parent of the applicant was born after April 17, 1985, the 2011 *Indian Act* amendments may not entitle the applicant to registration.

In this integrated application form, the individual has the opportunity to apply for both registration as an Indian under the *Indian Act* AND for an in-Canada Secure Certificate of Indian Status (in-Canada SCIS).

- The new in-Canada SCIS is intended to replace the Certificate of Indian Status (CIS), commonly referred to as the Status or Treaty card. The in-Canada SCIS is a secure identity document issued by Department of Indian Affairs and Northern Development (DIAND) to confirm that the cardholder is registered as an Indian as defined in the *Indian Act*.
- An in-Canada SCIS may be used to obtain services and benefits conferred in Canada exclusively to registered Indians (e.g., health benefits) in the same way as the existing CIS is used.

Who can apply using this form:

ADULT applicants (16 years of age or older) who meet ALL three conditions above may apply by completing Parts 1,2,3,4 and 5 of the application form and providing the required documents (see Section A for instructions for ADULT applicants).

PARENTS or GUARDIANS may apply on the behalf of children (15 years of age and younger) or dependent adults who meet ALL three conditions above by completing Parts 1,2,3,4 and 6 of the application form and providing the required documents (see Section B for instructions for applying PARENTS or GUARDIANS).

For more information on the 2011 Indian Act amendments, Gender Equity in Indian Registration Act and how the amendments could apply to you, visit the Indian and Northern Affairs Canada (INAC) website at <u>www.inac-ainc.gc.ca</u>.

For additional assistance on completing the form contact INAC by dialling toll-free 1-800-567-9604 or by email at InfoPubs@inac-ainc.gc.ca.

Complete and mail this application form and required documents to be registered, and if entitled to registration under the *Indian Act*, to receive the in-Canada SCIS.

TO APPLY:

• Use this application form to apply by mail only; mail the completed application form and documents to:

Application Processing Unit Indian and Northern Affairs Canada GD Stn Main Winnipeg MB R3C 0M2

- Follow the instructions in Section A if you are an ADULT applicant (16 years of age or older).
- Follow instructions in Section B if you are a PARENT or GUARDIAN applying on behalf of a child (15 years of age and younger) or dependent adult.
- Original documents that you provide with the application will be photocopied and/or scanned and returned to you by mail.



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Privacy Act Statement

Personal information provided in this document is collected under the authority of the *Indian Act* to determine entitlement to inclusion in the Indian Register and, if applicable, in a Band List maintained by the Department of Indian Affairs and Northern Development (DIAND), and to obtain an in-Canada format of a Secure Certificate of Indian Status (in-Canada SCIS). Individuals have the right to the protection of and access to their personal information under the *Privacy Act*. If registered, DIAND may disclose the applicant's personal information to Health Canada for the provision of non-insured health benefits and/or services, and to a third party for the purpose of printing the in-Canada SCIS. The personal information will be retained indefinitely by DIAND. Details of the collection, use, disclosure and retention of personal information are described in the Personal Information Bank INA PPU 110, available online at <u>www.infosource.gc.ca</u>.

| Indicate the Type of Application Adult Applicant (16 years of age or older) (see Section A for Instructions) Child (15 years of age or younger) or Dependent Adult Applicant (see Section B for Instructions) | | | | | | | |
|---|---|--|--|--|--|--|--|
| Part 1 Applicant Information (Applicant is the individual | who will be registered if entitled) | | | | | | |
| Family Name | Given Name(s) | | | | | | |
| Applicant Sex O Male O Female | Date of Birth (YYYYMMDD) | | | | | | |
| Mailing Address (Number/Street/Apartment/P.O. Box) | | | | | | | |
| City/Town Prov./Terr./State Country | Postal/ZIP Code Telephone No. (Daytime) Telephone No. (Evening) () () | | | | | | |
| Was the applicant adopted? O Yes O No | | | | | | | |
| Has the applicant made a previous application for registration? O Yes O No If yes, indicate the file number (if known): | | | | | | | |
| Indicate band affiliation | | | | | | | |
| Part 2 Parent Information (Applicant's parent who is/was | entitled to be registered pursuant to subsection 6(2) of the Indian Act) | | | | | | |
| Indicate which applicant's parent is/was entitled to be registered under the Indian Act O Mother O Father | | | | | | | |
| Parent Family Name | Parent Given Name(s) | | | | | | |
| Date of Birth (YYYYMMDD) Indian Register No. (if know | n) Band No. (if known) | | | | | | |
| Band Name | | | | | | | |
| Was this parent adopted? O Yes O No | | | | | | | |

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| Part 3 Grandmother Information (Applicant's grandmother who lost her entitlement to registration as a Status Indian as a result of marrying a non-Indian) | | | | | | | | |
|---|-----------------------------|--|--|--|--|--|--|--|
| Grandmother's Family Name (Married, Maiden or Both) | Grandmother's Given Name(s) | | | | | | | |
| Indian Register No. (if known) | Band No. (if kr | nown) | | | | | | |
| | . | | | | | | | |
| Band Name | | | | | | | | |
| | | | | | | | | |
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| Part 4 In-Canada Secure Certificate of Indian Status (So | CIS) Application | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| The in-Canada SCIS remains at all times the property of the Gover name it is issued. Any false or misleading statements on this form | or relating to any docur | ment in support of this application, including | | | | | | |
| concealment of any material fact, selling the in-Canada SCIS or pe may lead to criminal prosecution and is cause for revocation of the | | | | | | | | |
| ·····, · ···· · · · · · · · · · · · · · | | | | | | | | |
| Decumente la Support Identitu | | | | | | | | |
| Documents to Support Identity The family name and given names provided in Part 1 Applicant In | formation will appear of | on the in-Canada SCIS. | | | | | | |
| ADULT applicants must list the identity document(s) used to establ | | | | | | | | |
| A parent or guardian applying on behalf of a child or dependent adult must list the identity document(s) used to establish his/her identity. | | | | | | | | |
| Document Type Document No. | Expiry Date (YYYYMMDD) | Name of individual as it appears on document | | | | | | |
| Document Type Document No. | Expiry Date (YYYYMMDD) | Name of individual as it appears on document | | | | | | |
| Specimen Signature (not required for a child or dependent adult application): The signature below will appear on the in-Canada SCIS issued to you upon registration. Sign your name inside the box below without the signature touching the border. You may sign with an "X", in syllabics or in another language, as long as this is your usual legal signature. | | | | | | | | |
| Void if signature touches border | | | | | | | | |
| | | | | | | | | |
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| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| Adult Applicant Signature | | | | | | | | |



| Part 5 Adult Declaration (For applicants 16 years of age or older) | | | | | | | |
|---|-----------------|--|--|--|--|--|--|
| I request that I,, | | | | | | | |
| (insert your name) | | | | | | | |
| if entitled under the Indian Act, have my name included in the Indian Register and if applicable, also included in a | a Band List. | | | | | | |
| I have enclosed my original birth document listing my parents' names. I understand that it will be scanned and/or photocopied and the original returned to me. | | | | | | | |
| I declare that I have read and understood the NOTICE TO ALL APPLICANTS in Part 4. | | | | | | | |
| I have enclosed all requirements and documents for registration under the Indian Act and in-Canada SCIS is OR | ssuance | | | | | | |
| I have enclosed all requirements and documents for registration under the Indian Act and will submit all requirements and documents for SCIS issuance once registered. | | | | | | | |
| Please communicate with me in O English O French | | | | | | | |
| I solemnly declare that all of the statements made in this application are true. | | | | | | | |
| Signature of Applicant | Date (YYYYMMDD) | | | | | | |
| X | | | | | | | |
| * | | | | | | | |
| Mail to: Application Processing Unit Indian and Northern Affairs Canada GD Stn Main Winnipeg MB R3C 0M2 | | | | | | | |
| Parents or guardians applying on behalf of a child (15 years of age or younger) or dependent adult must complete and sign the parent or guardian declaration (Part 6) on the next page. | | | | | | | |
| | | | | | | | |



| | claration by Pa pendent Adult | | ardian(s) Applyi | ng on Behalf o | f a Child (15 years of a | ge or younger) or | |
|--|---|-----------------------------------|---|---|---|--------------------------------|--|
| We/I request that the child or dependent adult, | | | | | | | |
| we/i request | that the child of | dependent adult, | | (insert name of | child or dependent adult) | , | |
| if entitled un | der the <i>Indian Ac</i> i | <i>t.</i> have his/her na | me included in the | | and if applicable, also includ | led in a Band List. | |
| | | ., | | | | | |
| We/I have enclosed the child's or dependent adult's original birth document indicating his/her parents' names. We/I understand that it will be scanned and/or photocopied and the original returned to the applying parent or guardian. | | | | | | | |
| We/I de | clare that we/I ha | ve read and unde | erstood the NOTIC | E TO ALL APPLI | CANTS in Part 4. | | |
| ○ We/I hav OR | ve enclosed all re | equirements and o | documents for regi | stration under the | Indian Act and in-Canada | SCIS issuance | |
| | ve enclosed all re nts for SCIS issu | | | stration under the | Indian Act and will submit | all requirements and | |
| Please com | municate with us/ | /me in 🔵 Engl | ish 🔘 French | ı | | | |
| in Place of | of both parents Other Parent's c pendent adult is | or Legal Guardia | are required for re n's Signature or a | egistration unless a Court Order gra | s an original Statutory De anting sole custody or gu | claration ardianship of the | |
| | | | n (Primary Conta | ct) | | | |
| Note: All co | rrespondence w | ill be sent to the | e applying parent | /legal guardian. | | | |
| Family Nam | e | | | Given Name(s | 3) | | |
| . , . | | | | | , | | |
| If the contact information of the primary contact is not the same as the information provided in Part 1, provide additional contact information here. | | | | | | | |
| Mailing Address (Number/Street/Apartment/P.O. Box) | | | | | | | |
| City/Town | | Prov./Terr./State | Country | Postal/ZIP Code | Telephone No. (Daytime) | Telephone No. (Evening) | |
| | | | | | () | () | |
| I solemnly application | | the parent or leg | gal guardian of the | child or depender | nt adult and that all of the s | tatements made in this | |
| Signature | | | | | | Date (YYYYMMDD) | |
| x | | | | | | | |
| Signature o | of Other Parent | | | | | | |
| Signature of Other Parent Given Name(s) | | | | | | | |
| i anny ivan | 6 | | | Civen Name(| <i>)</i> | | |
| I solemnly declare that I am the parent or legal guardian of the child or dependent adult and that all of the statements made in this application are true. | | | | | | | |
| Signature | | | | | | Date (YYYYMMDD) | |
| X | | | | | | | |
| Mailter | Application Des | | | | | | |
| Mail to: | Application Proc Indian and North GD Stn Main | cessing Unit hern Affairs Cana | da | | | | |

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