



Enrollment Office

Enrollment Process

If you or a family member wants to be enrolled at Pueblo de San Ildefonso, then you must submit the following paperwork:

1. Application form
2. Birth Record Form
3. Marriage certificate showing birth Mother or Father from which claim of Indian blood is made
4. Certificate of Indian Blood of the individual through which claim of Indian blood is made
5. Birth certificate of the individual claiming to be entitled to enrollment
6. Family Record Tree showing your ancestors and indicating the person(s) from which the claim of Indian blood is made (CIB and DOB).
7. We ask that **both** mother and father sign the application form for minor children
 - a. If unable to do this, we need legal documents showing joint and/or legal custody of any minor children of the parent/guardian submitting the form

Please note that Pueblo de San Ildefonso requires 1/4 Indian blood and that must tie to a member of the Pueblo (hence the family tree).

Send these forms to:

Enrollment Office
02 Tunyo Po
Santa Fe, NM 87506
Fax: 505-455-7351

Or email to tsd@sanipueblo.org

You may be asked to appear before the Governor if of age and we are not familiar with you.

If you have any questions, please call the Tribal Services Director at 505-455-4105 or email to: tsd@sanipueblo.org.



02 Tunyo Po
Santa Fe, New Mexico 87506

SAN ILDEFONSO PUEBLO TRIBAL ENROLLMENT APPLICATION

Name of Applicant:

Date and Place of Birth:

Degree of San Ildefonso Indian Blood: SSNumber:

Do you reside at San Ildefonso Pueblo? Yes No

Reservation Address:

Mailing Address:

Name and relationship of closest relative or guarding enrolled at San Ildefonso Pueblo:

Are you enrolled in another tribe? Yes No

If yes, what tribe?

Do you claim San Ildefonso Tribal Membership? Yes No

Name of Father:

Tribe:

Maiden Name of Mother:

Tribe:

I CERTIFY THAT THE ABOVE INFORMATION IS CORRECT AND TRUE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE: _____

DATE: _____

GUARDIAN: _____

DATE: _____

WITNESS: _____

DATE: _____

Parents
signature if
minor child

Mother's Signature

Father's Signature



02 Tunyo Po
Santa Fe, New Mexico 87506

BIRTH REPORT

Name of Child:

Date of Birth: Sex of Child:

Place of Birth: Hospital:

Hospital Address:

Father's Name: DOB:

Tribe: Census #:

Degree of Indian Blood: SSN:

Mother's Name: DOB:

Tribe: Census #:

Degree of Indian Blood: SSN:

Head of Household (HoH):

Relationship of HoH to mother of this child:

Below information will be filled out by the Enrollment Office

This Child shall be enrolled with this Tribe: Pueblo de San Ildefonso

CERTIFICATION

ENROLLMENT ONLY

Christopher A. Moquino
Governor, Pueblo de San Ildefonso

Census #: _____
Total Indian Blood: _____

Date

Tribal Enrollment Clerk

Family Record for Enrollment

Grand Mother's Name

DOB:

Enrollment #:

Grand Father's Name

DOB:

Enrollment #:

Grand Mother's Name

DOB:

Enrollment #:

Grand Father's Name

DOB:

Enrollment #:

Mother's Name

DOB:

Enrollment #:

Name of Applicant

Father's Name

DOB:

Enrollment #: