

Cheesh'na Tribe Family Tree

Cheesh'na Tribal Council HC01 Box 217 Gakona, AK 99586 907-822-3503

How to Use This Form

There are multiple ways you can complete this form:

Option 1: Print and complete by hand.

When finished, you can:

Scan the completed form and email to BOTH tribaladmin@cheeshna.com AND enrollment@cheeshna.com. Please do not forget to attach any additional required materials to your email.

OR, send a hard copy via mail to: Cheesh'na Tribal Council HC01 Box 217 Gakona, AK 99586

Option 2: On your computer.

filling it out in your browser, try downloading the file and opening it on your computer.				
	Boxes that look like this can be typed in. Click the box to begin typing.			
	Boxes that look like this are either / or responses. Please select <i>one</i> .			
	Boxes that look like this are multiple choice responses. You may select as many as are applicable.			
When finished, you can:				
Save the completed form and email to BOTH tribaladmin@cheeshna.com AND enrollment@cheeshna.com. Please do not forget to attach any additional required	OR, send a hard copy via mail to: Cheesh'na Tribal Council HC01 Box 217 Gakona, AK 99586			
materi-als to your email.				

Please note: Depending on your device and where you are viewing this PDF, some functions may be unavailable. If you need assistance filling out this form, please get in touch with us.

Email: tribaladmin@cheeshna.com

Phone: 907-822-3503 Website: cheeshna.com



Cheesh'na Tribe Family Tree

TIBRAL			Great Grandfather :
		Grandfather Name:	DOB:
			Tribe/Clan:
Submit to: .		DOB:	Great Grandmother Maiden:
Cheesh'na Tribal Council		Tribe:	
HC01 Box 217 Gakona Alaska 99586	Father Name:	Clan:	DOB:
or Email to:			Tribe/Clan:
Enrollment@cheeshna.com	DOB:		
Tribaladmin@cheeshna.com	Tribe:		Great Grandfather :
	Clan:	Grandmother Maiden:	DOB:
			Tribe/Clan:
Applicant / Maiden if applicable:		DOB:	Great Grandmother Maiden:
		Tribe:	
		Clan:	DOB:
DOB:	Please List Maiden Name for the	•	Tribe/Clan:
Tribe:	women.		
Clan:	Also if known, please enter Middle		Form continues on the next page for
	Name, and Date Of Birth. This helps us when trying to		additional generations>
If adopted please list adoptive	identify citizens and improves		
parents below:	archived records.		Great Grandfather :
		Grandfather Name:	DOB:
			Tribe/Clan:
		DOB:	Great Grandmother Maiden:
		Tribe:	
	Mother Maiden:	Clan:	DOB:
			Tribe/Clan:
	DOB:		
	Tribe:		Great Grandfather:
	Clan:	Grandmother Maiden:	DOB:
	•		Tribe/Clan:
OFFICE USE ONLY		DOB:	Great Grandmother Maiden:
Date received:		Tribe:	
Entered in Rite Track:		Clan:	DOB:
			Tribe/Clan:

		Great Great Great Gra	andfather:	
	Great Great Grandfather:			
		DOB: T	ribe/Clan:	
	DOB:	Great Great Grandmother:		
	Tribe/Clan:	Maiden:		
de		DOB: T	Tribe/Clan:	
Father Side				
		Great Great Great Gra	andfather:	
	Great Great Grandmother:			
	Maiden:	DOB:	Tribe/Clan:	
	DOB:	Great Great Grandmother:		
	Tribe/Clan:	Maiden:		
		DOB:	Tribe/Clan:	
	I	Great Great Great Gra	andfather:	
	Great Great Grandfather:			
		DOB:	Tribe/Clan:	
	DOB:	Great Great Grandmother:		
a	Tribe/Clan:	Maiden:	T.11 (C)	
Sid	Please List Maiden Name for the women.	DOB:	Tribe/Clan:	
Mother Side	Also if known, please enter Middle Name, and Date Of Birth. This helps us when trying to identify citizens and improves			
Mot	archived records.	Great Great Grandfather:		
_	Great Great Grandmother:	dieat dieat dieat die	anulather.	
	Maiden:	DOB:	Tribe/Clan:	
	DOB:	Great Great Great Gr		
	Tribe/Clan:	Maiden:		
	İ sara	DOB:	Tribe/Clan:	
Please	e add any other information you would like archived for your family history below:			
Note				