

NEVADA INDIAN CHILD WELFARE ACT

ANCESTRY CHART

INSTRUCTIONS: If there is any indication that the child may be an Indian Child for purposes of ICWA application; fill out the form with as much information as provided by the parent(s) and/or relatives. (This form can be sent with your letter of inquiry to confirm tribal affiliation.) Use multiple pages if necessary for each child. If information is unknown, specify UNK. File copy in each child's case. Once tribe(s) responds report the determination to the Court and enter into appropriate UNITY screens.

	Child(ren)	D.O.B.	Father	Mother (include maiden)
Name:				
Address:				
Reported Tribal Affiliation, Location. If Alaskan Native specify child's Village or Regional Corporation:				
Enrollment #: (if known)				
If residence on Reservation, Domiciled or Ward of Tribal Court (specify):				
Grand-Parents, Specify Maternal or Paternal:				
Non-custodial siblings:				
Additional explanation as needed:				

NAME _____

DATE _____