The Confederated Tribes of the Grand Ronde Community of Oregon



Enrollment/Vital Statistics 9615 Grand Ronde Road Grand Ronde, Oregon 97347 Phone (503) 879-2116 1-800-422-0232 x 2116 Fax (503) 879-2480

APPLICATION FOR BLOOD QUANTUM CORRECTION

Blood Quantum Correction:

Name of member to be corrected: ______

Roll Number of member to be corrected: _____

Basis for requesting blood quantum correction:

I. Information on Tribal Members Affected by this Correction:

On the attached sheet, please provide a list of names, roll numbers, addresses, and telephone numbers of all Tribal members you believe may be affected by this correction. *Enrollment Staff will provide notice to all members who may be affected by your requested correction.*

Please include any documents that support the requested change.

TO THE BEST OF MY KNOWLEDGE, I HEREBY DECLARE THE ABOVE INFORMATION TO BE TRUE AND ACCURATE.

Signature of Applicant Application must be signed and dated Date