



ONTARIO COALITION OF INDIGENOUS PEOPLES

### APPLICATION FOR CITIZENSHIP

**Registrar:** Ken Deluco  
**e-mail:** Kendelu@hotmail.com  
**Phone:** 705-561-7358

Citizenship is granted to any applicant that has provided the necessary; identification, photo, documentation, information, payment along with proof of Aboriginal ancestry and who are of Aboriginal descent but not a band or tribal member residing on a reserve, in accordance with the Ontario Coalition of Indigenous People.

#### 1. AUTHORIZATION TO ACCESS FILE

By signing below, I give authorization for my file to be accessed on behalf of anyone sharing my ancestry.

Signature \_\_\_\_\_ Date \_\_\_\_\_  
Please use esign on the menu above

#### REQUIREMENT CHECKLIST:

NOTE: Incomplete applications will delay the process. Please ensure requirement checklist is followed.

- FORM:** Fully completed, signed & dated
- PHOTO:** 1"x1" recent, clear head & shoulders
- PHOTO ID:** ie Driver's License or Passport
- PAYMENT:** Money Order or Certified Check
- DOCUMENTS:** Proof of Aboriginal Ancestry
- IDENTIFICATION:** Birth or Church Baptismal Certificate

#### 2. METHOD OF PAYMENT (Only))

Money Order/CCheque \$ \_\_\_\_\_  
Etransfer \$ \_\_\_\_\_  
Total Amount Sent \$ \_\_\_\_\_

#### FEES

NO Renewal fees as of September 15, 2013  
**\$50.00** per person including youth  
**\$25.00** Replacement card

#### 3. ABORIGINAL STATUS

##### CHECK APPROPRIATE ANSWER

- Status Indian with Band Membership
- Status Indian without Band Membership
- Non-Status Indian
- Métis
- Inuit

Do you normally live on a First Nation/Native Reserve?  Yes  No

#### 4. PERSONAL INFORMATION (Please Print)

Name \_\_\_\_\_  
**Last/Surname** **First** **Middle**  
Name at Birth \_\_\_\_\_ Date of Birth \_\_\_\_\_ Place of Birth \_\_\_\_\_  
**Year / Month /Day**

#### 5. CONTACT INFORMATION (Please Print)

Address \_\_\_\_\_  
**No, Street, Apt, RR, PO Box** **City/Town** **Province** **Postal Code**  
Phone No \_\_\_\_\_ E-mail \_\_\_\_\_ Gender \_\_\_\_\_  
**Home / Cell**

## GENEALOGICAL INFORMATION /ABORIGINAL STATUS

Please provide first & last names and use women's maiden names where applicable.

6. Mother's Ancestor's	Aboriginal Ancestry	Traditional Territory	
_____ Mother	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ Place of Birth	If Yes, <input type="checkbox"/> Status <input type="checkbox"/> Métis <input type="checkbox"/> Inuit
_____ Mother's Mother	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ Place of Birth	If Yes, <input type="checkbox"/> Status <input type="checkbox"/> Métis <input type="checkbox"/> Inuit
_____ Mother's Father	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ Place of Birth	If Yes, <input type="checkbox"/> Status <input type="checkbox"/> Métis <input type="checkbox"/> Inuit

7. Father's Ancestor's	Aboriginal Ancestry	Traditional Territory	
_____ Father	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ Place of Birth	If Yes, <input type="checkbox"/> Status <input type="checkbox"/> Métis <input type="checkbox"/> Inuit
_____ Father's Mother	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ Place of Birth	If Yes, <input type="checkbox"/> Status <input type="checkbox"/> Métis <input type="checkbox"/> Inuit
_____ Father's Father	<input type="checkbox"/> Yes <input type="checkbox"/> No	_____ Place of Birth	If Yes, <input type="checkbox"/> Status <input type="checkbox"/> Métis <input type="checkbox"/> Inuit

### OATH OF ABORIGINAL STATUS AND AFFILIATION

#### I make the declarations that:

- I am an Aboriginal person as confirmed within Section 35 of the Constitution of Canada 1982, as follows 35.(2). In accordance with this Act "Aboriginal Peoples of Canada" are the Indian, Inuit, and Métis peoples of Canada
- I am: Status, Non-Status, Métis, Métis with Indian Status, Inuit
- I believe that we as Aboriginal Peoples have the inherent right of self-determination and rights to; land, harvest, hunting and fishing, to practice our Aboriginal traditions and to life, liberty, and the pursuit of justice and happiness for our people, our families, and for our self.
- I have the inherent right of self-determination our communities may grant members the right to participate in activities of those communities across Ontario, which includes to have meetings, to hunt, to fish and make regulations for its purpose.

I make the declaration that my traditional territory for the purpose of exercising my Aboriginal rights is as follows; \_\_\_\_\_

#### I also make the declarations that:

- I do not live on a First Nation Reserve.
- I have chosen to join the "Ontario Coalition of Indigenous Peoples" (OCIP), who is the Provincial Affiliate of the "Congress of Aboriginal People" (CAP), to champion and represent our collective Aboriginal rights.
- OCIP is a coalition of Aboriginal People and Aboriginal Organizations who are working together to achieve our goals, objectives and aspirations.
- I pledge to respect, assist and honour these sisters and brothers in our common cause.
- I pledge to follow the laws, regulations and policies as established by the "Ontario Coalition of Indigenous Peoples" and the "Congress of Aboriginal People" (CAP).
- I will honour our proud Aboriginal heritage and participate in OCIP and CAP meetings and processes in a respectful and honourable manner.

I swear under oath that all the information provided by me in this membership application, is true and correct and I understand that it is an offense to make fraudulent and misrepresenting statement.

- I understand that this is a formal document of the "Ontario Coalition of Indigenous Peoples" and will be used in a court of law if required to champion our collective rights.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

Please use esign on the menu above