

Monacan Indian Nation

111 Highview Drive Madison Heights, VA 24572 434-363-4864

Guidelines for Current Citizens Requesting New ID Cards And Renewing the New ID Cards

Citizens of the Monacan Indian Nation who were on the Official Rolls as of the date of Federal Recognition (January 28, 2018) will be required to bring their files up to date to follow the new Policies and Procedures initiated since the date the Monacan Indian Nation was Federally Recognized.

- 1. Citizen must complete the Current Citizen ID Card Application, sign, and date.
- 2. Citizens requesting the New Federally recognized ID Card FOR THE 1ST TIME MUST submit his/her Original Certified State Issued Birth Certificate and Certified Copy of Marriage License or Court Order to verify name change if name is different from Birth Certificate. Copies of Birth Certificates and Marriage Licenses are not acceptable. Birth Registration Cards/Notices are not acceptable. Original documents will be returned to citizen via regular mail.
- 3. Citizens requesting a renewal of the New Federally recognized ID Card (hard, white plastic card) do NOT need to resubmit their Birth Certificate or Marriage License or court order if your name has not changed since your last card was issued. If your name has changed, citizen must submit a Certified Copy of the Marriage License, Court order, or Divorce Decree supporting the name change.
- 4. Include a Self-addressed Stamped Envelope for Birth Certificate, Marriage License, court documents to be returned. These items will be mailed separately from the ID Card.
- 5. Payment of \$25 ID Card fee may be paid by certified check (personal checks are not accepted) or money order made payable to Monacan Indian Nation, or by credit/debit card. Credit and Debit Card Payment Form can be found in the Current Citizen ID Card Renewal Packet. Fee is non-refundable.
- 6. Submit a recent color photo with a light-colored background. Photo must be of good quality and no smaller than passport size (2 inches square) and no larger than 4 inches by 6 inches. Photos with hats, sunglasses, or that do not clearly show the entire face/head are not acceptable. Citizen may call for an appointment to have your photo taken in the office.
- 7. Complete the Signature Form. Signature is valid for ID Card ONLY. Citizen may call to schedule an appointment to complete signature process in the office.
- 8. Release of Information Form is optional. Applicant should only complete the form if a family member will be checking on the status of your ID Card.
- 9. Mail application, Birth Certificate, Marriage License, court documents, photo, signature form and payment to Monacan Indian Nation, Attn: Enrollment Department, 111 Highview Dr, Madison Heights, VA 24572. Application may be brought in **BY APPOINTMENT ONLY for inperson processing**, or may be dropped off at any time for processing in order received.
- 10. Upon receipt of above items, Enrollment office will audit citizen's file for required documents showing Monacan lineage back to the Historic Original Rolls. If documents are missing, Enrollment Dept will notify the citizen via email, standard mail or phone call advising what documents are needed to complete the file before an ID Card can be issued. Application will be

- held in Pending file until all documents are received. The application will be moved back to the Working File once all documents are received.
- 11. ID Cards will be issued in the order in which they are received. Date received will be the date all documents and payment are received, and file is complete. NO EXCEPTIONS!
- 12. ID Card will be mailed to citizen. However, ID Card will be given to citizens who schedule appointments to have cards made. ID Cards will not be issued/printed on a walk-in basis. Appointments are required.



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	Office Use Only
Date _	Ву

Current Citizen ID Card Application

Full Name:				
(First)	(Middle)	(Middle) (Maio		(Last)
Mailing Address:				
(PO Box o	or Street)	(City)	(State)	(Zip)
Physical Address:				
(Street)				
(City)	(6	County)	(State)	(Zip)
Firth place:	/6:		rthdate:	
(City)	(State)		(MM/DD/YYYY)	
ast 4 Digits of Soc Sec #:	Home Phone #:		Cell Phone #	
nail address: Preferred Method of Contact:				
Andrei Charan Zainala ann Naodini	dual Manusiani Canana	ted Diversed D	annotic Double at Miderno	
Marital Status (circle one) Indivi	duai iviarried Separa	tea Divorcea Do	omestic Partner Widowed	
eteran (circle one) Yes No H	Head of Household (ci	rcle one) Yes No	Gender (circle one)	Male Female
leightftin	Hair Color (Circle one): Black Blonde	Brown Gray Red Sar	ndy White
ye Color (Circle one): Blue Bla	ack Brown Green	Gray Hazel Pin	ık –	
s application being filled out on l	behalf of an adopted cl	nild, minor, or oth	ner person who requires leg	gal guardianship?
If yes, relationship	· · · · · · · · · · · · · · · · · · ·			
You must provide official docum	ents attesting to custo	dial or guardiansh	nip status.)	
CERTIFY THAT ALL THE INFORMA	ATION PROVIDED IN TH	IIS APPLICATION I	IS TRUE AND ACCURATE TO	THE BEST OF MY
NOWLEDGE. I UNDERSTAND TH				
ROUNDS FOR DISENROLLMENT		·		
EPARTMENT, AND OFFICE PERS				
NFORMATION I PROVIDE IN THIS				,
ignature			Date	
or Office Use Only				



MONACAN INDIAN NATION RELEASE OF INFORMATION FORM

l,	, g	ive the Enrollment Department of t	he Monacan
Indian Nation permiss	on to discuss my Enrollment App	plication file with the following peo	ple:
Name:		Relationship:	
in nature and the Enro above. The informatio unsigned documents r allowed to make any c	Illment Department will be allow in that can be discussed with the needed to complete the enrollme hanges to my application, receiv payment method. This Release	n Nation considers all records to be red to discuss my file with only the p m is status of file, status of ID Card, ent file. I also understand that they re copies of any information in my fi of Information Form will remain in o	people listed and missing of will not be le nor be giver
 Signature		Date)
	ACKNOWLED	GEMENT	
State of	County of	on	20
before me,	Personally ap	(Date)	
(Insert name and t who proved to me based on acknowledged to me that he on the instrument the persor PENALTY OF PERJURY un is true and correct.	itle of the Notary) satisfactory evidence to be the Person(s) /she/they executed the same in his/her/th s(s), or the entity upon behalf of which the der the laws of the State of	peared	nin instrument and /their signature(s) I certify under
Witness my hand and officia	seal.		
Signature:		(\$	Seal)
My Commission expires:			

Revision Date 9/14/2021



MONACAN INDIAN NATION

RELEASE OF FAMILY HISTORY DOCUMENTS

		ive the Enrollment Department of the I Ionacan Family History Research Docur	
NAME:		RELATIONSHIP:	
-			
in nature and the Enroll Documents only in the Enrollment Department Indian Nation office. A d	lment Department will place or above-named individuals' enro t and not be given to anyone fo copy of this Release will be pla	an Nation considers all records to be copies of my Monacan Family History Recollment application file. Copies will renor personal use or use outside of the Moced in the Enrollment File for each personain in effect until revoked by me in	esearch nain in the Ionacan son named
		Date	**
	ACKNOWLE	DGEMENT	
State of	County of	on	20
instrument and acknowledged his/her/their signature(s) on th	s of satisfactory evidence to be the Pe I to me that he/she/they executed the s ne instrument the person(s), or the enti NALTY OF PERJURY under the laws s true and correct.	(Full legal name of person signing application rson(s) whose name(s) is/are subscribed to the water same in his/her/their authorized capacity(ies), and ty upon behalf of which the person(s) acted, execution	within d that
Signature: My Commission expires:		(Sea	al)

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Signature Form

Applicants and citizens age 15 and over, please sign your name in the box below. It will be scanned into your file and used as the signature on your ID Card only. Ages 14 and under, no signature is necessary. Parents, please DO NOT sign for your children. "Unable to Sign" will be shown on their signature line.

Your *entire signature* must fit within the box but *not touch* the borders.

Use a fine point Sharpie marker

Black ink only

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Credit and Debit Card Payment Form

Applicant's Name
Applicant's Address
Phone #
Name on Credit/Debit Card
Billing Address Associated with card
Type of Card: (Circle One) MasterCard/VISA/DISCOVERY/AMERICAN EXPRESSCreditDebit Fee Amount \$ Card NumberExpiration Date
Purpose of Fee:EnrollmentID Card RenewalID Card Replacement DonationOther, specify
I,, authorize the Monacan Indian Nation to make a one-time charge to the above card for the purpose specified.
Card Holder Signature Date