Absentee Shawnee Tribe of Oklahoma Enrollment Office

<u>Director</u> Carly Dyer

Enrollment Clerk Kim Little Axe



Enrollment Staff Melissa Hill Shelby Raines

<u>Tribal Secretary</u> John Raymond Johnson

Enrollment Office's Identity Verification Process

The Enrollment Office will be implementing a new verification process on September 1, 2017. This process will include verifying an AST Tribal Member identity through primary and secondary form of Identification (ID) or a stand-alone primary form of ID when the Member is being issued a replacement CDIB Card. The mail-in process will accept color-copied IDs (excluding birth certificate/FS-240 form) as well as a notarized statement stating that the original documents were seen. The notarized statement and the color-copied document must be completed on the same paper.

This verification process will be conducted every time a CDIB Card is being issued to a AST Tribal Member. Due to the cause of identity theft and incidents of fraudulent cards being produced, this process will provide an additional method to protect the Member's information and will continue to uphold the integrity that the Absentee Shawnee Tribal Members CDIB card has with state and federal entities.

This process will not interfere with any member's enrollment status, if by some chance a member cannot be issued a CDIB Card until the appropriate form of IDs are submitted; the Enrollment Office will be more than happy to verify enrollment for the CDIB through an enrollment verification to any other department or entity that may accept this form of verification. This enrollment verification process will be conducted on a department-to-department basis.

There will be a three-tier list of IDs that may be presented to the Enrollment office in order to be issued a replacement CDIB Card. The Stand-Alone Primary IDs are made to be the only form of ID that does not have to be accompanied with a secondary form of ID. If a Stand-Alone Primary form of ID cannot be presented then a Primary form of ID will be required with at least one Secondary form of ID. Please reference the following list on page 2 to what will be verified as a form of ID for The Enrollment Office's Identity Verification Pro

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Stand-Alone Primary Form of Identification	Primary Form of Identification (with a Secondary form of ID)	Secondary Form of Identification
 State ID Card or Driver's License (no More than 3 months expired) Oklahoma Self Defense Act License (Concealed/Open Carry License) (no more than 3 months expired) United States Passport (no more than 3 months expired) Out-of-State Drivers License An identification document issued by the United States Armed Services (Issued by the Department of Defense); one of the following: Military identification card Military dependent identification card Military dependent identification card 	Birth Certificate FS-240 form: Consular Report of Birth Abroad	 Any primary proof of identification, which is not used as the primary ID for a U.S. citizen For any person under the age of 18, an affidavit signed by the parent or legal guardian Identification Document issued by one of the following: Oklahoma public, private, or parochial secondary school Oklahoma institution of higher education Oklahoma employer Oklahoma employer Oklahoma gun permit Pilot license Oklahoma lifetime hunting or fishing license Oklahoma voter identification card Social Security card Health insurance card Motor vehicle registration or title Marriage certificate Separation or divorce judgment Professional degree, certificate, or license Deed or title to property in Oklahoma, including a burial plot deed Health, life, or home insurance policy issued to the applicant Automobile insurance policy or security verification form issued to the applicant A valid U.S.D.O.T. health card, as required by 49 C.F.R. Part 391 Digital photograph comparison, if a Citizenship-generated digital photograph is already on file with the AST Enrollment Office Military discharge (DD-214), unless specified not to be used for identification

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True Copy of Original Form of Identification(s)

Color copy the form of identif	fication in this Box or attach color	-copy to this Document
	, (the adult applicant or parent/leg	al guardian of the applicant)
(Print Full Name)	, (the adult applicant or parent/leg	al guardian of the applicant)
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