

## DECLARED MEMBERS GENEALOGICAL VERIFICATION FORM

We are working with ethnohistorian Dr. Jonathan Clapperton, and his research team at Landmark Resource Management Ltd. (“Landmark”), to create family trees for all members connecting them to the original Chacachas Treaty Band. The short-term goal is to verify the lineage of declared members. The long-term goal is to have a database of historical/ genealogical information with as many Chacachas descendants as possible.

If you require assistance with filling out this Declared Members Genealogical Verification Form, or have any questions about eligibility, requirements, or the review process, please contact Clapperton by email ([chacachas.membership@landmarkrm.com](mailto:chacachas.membership@landmarkrm.com)) or phone (403-701-8943).

### 1 Criteria for Membership

In order to be verified for membership in Chacachas Treaty Nation, the declared member must prove genealogical descendancy from a member of the historic Chacachas Band prior to its amalgamation with the Kakisheway (Loud Voice) Band. Chacachas Treaty Nation has retained Clapperton to provide impartial, expert research and capacity support for applicants throughout this process.

Connections other than direct genealogical descendancy, whether through adoption or cultural connection, may be considered. If you have questions about eligibility for membership in Chacachas Treaty Nation, please contact Clapperton.

### 2 Application Process

The application process is as follows:

1. Contact Clapperton via email at [chacachas.membership@landmarkrm.com](mailto:chacachas.membership@landmarkrm.com) to log your request for verification. Please include the names of all the family members you are looking to verify.
2. Clapperton will ask you to fill out, as completely as possible, and return this Declared Members Genealogical Verification Form. Please complete one form per person. If you have any questions about filling out this form, Clapperton will provide assistance.
3. After the Declared Members Genealogical Verification Form has been returned to Clapperton, additional information may be requested to clarify.
4. Clapperton will provide a genealogical/historical assessment report to Chacachas Treaty Nation Council. The report will contain Clapperton’s impartial, expert opinion on the Declared Member’s genealogical connections to the original Chacachas Treaty Band, include a family tree, and will state the documentation included.
5. Chacachas Treaty Nation Council will use the report to decide the verification of each member. Council will provide its rationale to applicants regarding the decision. Chacachas Treaty Nation Council will contact applicants to inform them whether their application has been approved or denied. If an application is denied, the applicant will be provided with an opportunity to appeal the decision.

**3 Applicant Information**

**3.1 Applicant Information**

First Name:

Last Name:

Treaty Number:

Mailing Address:

Phone Number:

Email Address:

Gender:

**3.2 Applicant's Father (if known):**

First Name:

Last Name:

Birth Date:

Band Name (if applicable):

**3.3 Applicant's Mother (if known):**

First Name:

Last Name:

Birth Date:

Band Name (if applicable):

**3.4 Applicant's Grandparents (if known):**

Name/Band of Paternal Grandfather:

Name/Band of Paternal Grandmother:

Name/Band of Maternal Grandfather:

Name/Band of Maternal Grandmother:

**3.5 Applicant's Great-Grandparents (if known):**

Name(s)/Band(s) of Paternal Great-Grandparents:

Name(s)/Band(s) of Maternal Great-Grandparents:

**3.6 Additional Information**

Please add any additional information that the applicant feels relevant to their application and that will assist Clapperton in tracing their genealogy:

1. I hereby affirm that the statements and information provided in this application and the accompanying documents are, to the best of my knowledge, true and accurate.
2. I hereby allow Clapperton, and his researchers at Landmark, to access and review the confidential documents that have been submitted with this application.
3. If applying on behalf of adult family members, I hereby affirm that I have obtained their express consent to apply on their behalf.

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Date

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Signature of Applicant  
(or person applying on behalf of someone else)

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Name (printed), if other than applicant,  
and relationship to applicant

#### **4 Documentation**

Applications must be accompanied by at least one of the following documents to verify the identity of the applicant:

- Birth certificate or other identification document (e.g., driver's license, registration of marriage, status card, etc.).

If you have attached additional documents supporting your form, such as the birth or death records of parents, grandparents, etc., that demonstrate genealogical connections, please provide the document names and descriptions in the space below, and attach the documents to your submission:

In the case of an absence of documentation, written/oral testimonies may be sufficient and will be evaluated by both the external expert and Chacachas Treaty Nation Council alongside your application. Please discuss these written/oral testimonies with Clapperton.

## **5 Storage of Confidential Documents**

All documents provided to Clapperton with your Declared Members Verification Form will be stored on a Landmark secure server for the length of your application review by Clapperton. Only Clapperton, and those at Landmark assisting him, will be able to access and review your confidential documents. If your application is approved, Clapperton will store your documents on the secured Landmark server until Chacachas Treaty Nation has the capacity to store these in-house, at which time Clapperton will transfer them to Chacachas Treaty Nation. If your application is rejected, all confidential documents will be destroyed within two months of the final decision.