

**CONSTITUTION AND BYLAWS
OF THE
IOWA TRIBE OF OKLAHOMA
(As Amended to August 21, 2008)**

PREAMBLE

We, the members of the Iowa Tribe of Oklahoma, in order to promote our common welfare and to secure to ourselves and our descendants, the rights, powers and privileges offered recognized by the Thomas-Rogers Oklahoma Indian Welfare Act, approved June 26, 1936 (49 Stat. 1967), do establish this organization and adopt this Constitution and By-laws pursuant to that Act. (This document supersedes the original Constitution and Bylaws and its amendments, which document was initially approved by Assistant Secretary of the Interior, Oscar L. Chapman on September 22, 1937, and ratified by the Tribe on October 23, 1937.) Any ordinances or resolutions enacted under that prior governing documents shall continue in effect to the extent they are not in conflict with this Constitution and Bylaws.

ARTICLE I - NAME

The name of this organization shall be the Iowa Tribe of Oklahoma. The seat of Government shall be at the Tribal Administrative Office.

ARTICLE II - MEMBERSHIP OF TRIBE

Section 1. Membership. The membership of the Iowa Tribe of Oklahoma shall consist of the following persons who have not elected to be enrolled with another Tribe or have not received a share of land or money by virtue of having been enrolled as a member of another Tribe.

- (a) All living persons who whose names appear on the approved membership roll of the Iowa Tribe of Oklahoma dated March 24, 1975.
- (b) All direct lineal descendants of the Iowa Tribe of Oklahoma allottees who possess one-sixteenth (1/16) or more degree of Iowa Tribe of Oklahoma Indian blood, who have one parent who is a recognized member of the Iowa Tribe of Oklahoma and who apply for membership after the effective date of this amendment.

Section 2. Business Committee Power. The Business Committee shall have the power to make rules and regulations subject to approval of the Secretary of the Interior, governing the adoption of members not otherwise provided for in the Constitution and Bylaws and governing future membership and loss of membership.

Received By: _____

Date Received _____

IOWA TRIBE OF OKLAHOMA Application for Enrollment

All questions must be answered in order to process the application for enrollment
PLEASE PRINT

ORIGINAL CERTIFIED BIRTH CERTIFICATE MUST BE SUBMITTED WITH APPLICATION WILL NOT BE RETURNED

Name: _____ () _____
Current Last Name First Name Middle Name Phone Number

Mailing Address: _____
Street City State Zip

Birth Date: _____ Birth Place: _____ Social Security # _____

Applicant's Degree of Blood Claimed

Applicant must have 1/16th or more Iowa Indian Blood

Iowa Tribe: _____ Other: _____ Total Degree of Indian Blood: _____
Give Degree Give Degree and Tribe

Is either parent enrolled as a member of another tribe? _____ Yes _____ No If Yes, which tribe? _____
Is applicant a direct lineal descendent of a member of this tribe? _____ Yes _____ No
Is applicant enrolled with another tribe? _____ Yes _____ No If Yes, which tribe? _____
Is applicant an adopted child _____ Yes _____ No If Yes, attach certified copy of Court Decree
Has applicant received a payment or any other benefits as an enrolled member of another Tribe? _____ Yes _____ No
If answered yes, please specify _____

Parent on roll of the Iowa Tribe of Oklahoma through the whom enrollment rights are claimed

Name: _____ Roll # _____ Relationship: _____

Original Allottee of the Iowa Tribe of Oklahoma through whom enrollment rights are claimed

Name: _____ Roll # _____ Relationship: _____

Constitution and Bylaws of the Iowa Tribe of Oklahoma

Section I. The membership of the Iowa Tribe of Oklahoma shall consist of the following persons who have not elected to be enrolled with another Tribe or have not received a share of land or money by virtue of having been enrolled as a member of another Tribe. All direct lineal descendants of Iowa of Oklahoma allottees who possess one-sixteenth (1/16) or more degree of Iowa of Oklahoma Indian blood, who have one parent who is a recognized member of the Iowa Tribe of Oklahoma and who apply for membership after the effective date of this amendment.

I certify that the above information is true and correct to the best of my knowledge; and grant full permission to the Iowa Tribe for the use and release of information obtained through Local, State, National, and Tribal Agencies for enrollment purposes

Signature of Applicant, Legal Parent or Guardian

Date

FOR OFFICE USE ONLY

Approval Date: _____	<u>Reason for Denial:</u>
Resolution #: _____	_____ No Parent on roll
	_____ Less than 1/16 Iowa Blood
	_____ Listed on another tribal roll
_____ ENROLLMENT SPECIALIST	_____ DATE

NOTE: PLEASE FILL OUT COMPLETELY AND THOROUGHLY AS POSSIBLE INDICATING BLOOD DEGREE TO THE BEST OF YOUR KNOWLEDGE.

