

## **INDIAN ANCESTRY QUESTIONNAIRE (CD-116) INSTRUCTIONS**

**PURPOSE:** The purpose of this form is to determine if a family has Indian Ancestry. This form should be completed by the family of any child that comes in to Children's Division custody in order to ensure compliance with the Indian Child Welfare Act of 1978.

**NUMBER OF COPIES AND DISTRIBUTION:** The original form is retained by the county office in the child's file.

### **INSTRUCTIONS FOR COMPLETION:**

1. Name of person/caregiver filling out the form
2. That person's relationship to the child
3. List name of the child or children involved
4. The caregiver will let CSW know if the child has or doesn't have Indian ancestry
5. The caregiver will list tribal affiliations, along with names of family members who may be registered with a tribe
6. Tribe name(s)
7. Known traditional and official names of tribe(s)
8. List reservation name if name of tribe is not known
9. List names, relationship to child/children, tribe name and enrollment number information
10. Signature of person/caregiver who completed the form.

**INSTRUCTIONS FOR RETENTION:** The original is permanently retained in the child's file.

### **MEMORANDA HISTORY:**