

**United States
Department of the Interior
Bureau of Indian Affairs
Alaska Region**

Application to Receive Native Land

Grantee: _____ Date: _____

Application is hereby made, to receive the parcel of land that _____
is conveying to me by a Gift Deed in restricted status. This land is described as follows:

_____ containing _____ acres, more or less.

In justification of this application, true statements are made to the following:

1. Date of Birth: _____ Age: _____
2. Social Security Number: _____
3. Marital Status: _____
4. Education: Years in Elementary School _____ High School _____ College _____
5. The following person(s) are dependent upon me for support (Give names, ages, and relationship: _____

6. I am enrolled as an _____ Degree of Native Blood _____
Village Corporation _____ Regional Corporation _____
7. Permanent Address: _____
Phone Number: _____ Best time to be reached: _____
8. The amount of my annual income is: \$ _____
9. My income is obtained from: _____

10. If receiving public assistance grants from the State, or general assistance from the Bureau of Indian Affairs, or funds from the Veteran's Administration, Social Security, or any regular public benefit, state kind and amount (if none, state "none").

11. If indebted to the United States, state amount and purpose of indebtedness (if none, state "none")._____

12. I request to receive this land in ☐ Restricted status ☐ Unrestricted status (free of restrictions), for the following reason(s):

Signed this _____ day of _____, 20_____, I hereby certify that the effect of this application was explained to me and that I fully understand it.

GRANTEE Signature

Subscribed and sworn to before me this _____ day of _____, 20_____.

Postmaster/Notary Public in and for Alaska
My Commission Expires: _____

Signed this _____ day of _____, 20_____, application hereby recommended for approval.

Realty Officer, Alaska Region

Application hereby approved this _____ day of _____, 20_____.

- _____
☐ Regional Director, Alaska Region
☐ Superintendent, Fairbanks Agency