

OSAGE CDIB DEPARTMENT
627 Grandview Avenue
Pawhuska, OK 74056
(918) 287-5389

FAMILY HISTORY PART OF APPLICATION

Is applicant adopted? _____ Yes _____ No
Are either of your parents adopted? _____ Yes _____ No

If answer is 'Yes', list natural parents full name: _____

FATHER: _____ Roll # _____ DOB _____ DOD _____	Paternal Grandfather:	Paternal Great Grandfather:
	_____	_____
	Roll # _____ DOB _____	Roll # _____ DOB _____
	DOD _____	DOD _____
	Paternal Grandmother:	Paternal Great Grandmother:
	_____	_____
	Roll # _____ DOB _____	Roll # _____ DOB _____
	DOD _____	DOD _____

MOTHER: _____ Roll # _____ DOB _____ DOD _____	Maternal Grandfather:	Maternal Great Grandfather:
	_____	_____
	Roll # _____ DOB _____	Roll # _____ DOB _____
	DOD _____	DOD _____
	Maternal Grandmother:	Maternal Great Grandmother:
	_____	_____
	Roll # _____ DOB _____	Roll # _____ DOB _____
	DOD _____	DOD _____

- FILL IN THE MOTHER'S AND FATHER'S NAMES – THEN DO ONLY THE OSAGE GENEALOGY SIDE
- THIS MUST BE ATTACHED TO THE BACK OF THE APPLICATION