



Njernda - To know our living culture
Njernda Aboriginal Corporation

CONFIRMATION OF ABORIGINALITY

Applicant Declaration

NAME: _____ SURNAME: _____

OTHER NAMES (eg: maiden, nicknames) _____

RESIDENTIAL ADDRESS: _____

D.O.B. _____ PLACE OF BIRTH: _____

MOTHERS MAIDEN NAME: _____ GIVEN NAMES: _____

FATHERS NAME: _____ GIVEN NAMES: _____

NAME OF TRIBAL, CLAN OR FAMILY GROUP (IF KNOWN) _____

AMOUNT OF TIME LIVING IN THIS REGION (ECHUCA & DISTRICT) _____

I hereby declare that I am of Aboriginal descent, I identify as an Aboriginal and I am accepted as such by the community in which I live.

Signature of Applicant and/or
Signature of Parent/Guardian
(if applicant is under 15yrs of age)

Date

Declared at: _____ this _____

Day of: _____ year _____

It is hereby confirmed that the above named is of Aboriginal Descent, identifies as an Aboriginal and is accepted as such by the community in which they live.

Meeting Date: _____

Seconded By: _____
(Board of Director)

(sign name)

Seconded By: _____
(Board of Director)

(sign name)

(Njernda Aboriginal Corporation common Seal to be stamped above)