

MINISTRY OF INDIGENOUS PEOPLES' AFFAIRS



No. 23, Ilang-Ilang Street, RH-VI, Cotabato City <u>mipa@bangsamoro.gov.ph</u>

VERIFICATION/CHECKLIST



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OF APPLICANTS FOR THE ISSUANCE OF CERTIFICATE OF TRIBAL MEMBERSHIP

A. PEI	RSONAI	L INTERVIEW (NO PROXY)
	1. Nam	ne
	2. Trib	e
	a.b.c.d.	entage of blood to the tribe he / she is claiming for : 100% 75% 50% 25% None
	a. b. c.	fluent he/ she speaks the dialect of tribe whom he / she is claiming for : Fluent Good Fair Cannot speak
	a. b. c.	whow to the customs and traditions of the tribe whom he / she is claiming for Fluent Good Fair No knowledge
	a. b.	al Group of assimilation : Intact Semi-assimilated Assimilated
B. AC		AKEN: Approved Disapproved
		Chairman, Screening Committee
		Provincial Officer (Name & Signature) Province of



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CERTIFICATE OF TRIBAL MEMBERSHIP

	() Scholarship() Local Employment() Land Matter		() NA () Oth	ril Service Requirement POLCOM ners ecify
	PERSONAL INDEX (Please	PRINT all entries	legibly)	
	NameSurname	Given Name		Middle Name
	Place of Birth Mailing Address Provincial Address		Tr	
	Name of Spouse (If Married)			
I.	EDUCATIONAL ATTAINMEN Education Name of So		clusive Date	es Degree Obtained
	Elementary Secondary College Vocational Post Graduate			
II.	PARENTAL INDEX			
	Father Tribe Place of Birth Grandfather Tribe Place of Birth Grandmother Tribe Place of Birth Grandmother Tribe Place of Birth	Grand Tribe Place Grand Tribe Tribe	Of Birth	
٧.	If Purpose of Certification is Lan	d Matter, fill up the	following:	
				Lot Area
/ .	Do you speak and understand to	he dialect of the tri	be you clair	ned to belong?
	() YES	()	NO	Please Check
	Have you accepted the customs which you claimed?	and traditions /pe	rcepts and	practices/ etc. of the tribe
	() YES	()	NO	



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If NO, Why?						
	Continue in separate she	et if necessary.				
	der penalties of pe best of my knowledge and		answers	given	above	are
		Printed Nar	me/Signati	ure of A	pplicant	
		Res. Cert. No Issued at Issued on T I N				
Affiant exhibited to me h	ND SWORN to before me is/her Res. Certificate No F	e, this Philippines.	day of _		issued o	20 n at
Doc. No. Page No. Book No. Series of		Office	er Adminis	tering C	Dath	



MIPA - BARMM

Republic of the Philippines Bangsamoro Autonomous Region in Muslim Mindanao

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Province of		
Municipality of		
barangay or		
	Date	
To Whom It May Concern :		
THIS IS TO CERTIFY THAT Mr. / Mrs. / Ms		
and Mrs	of the s	oouses Mr.
of and Mrs. they are bonafide member of the	belong to the Indigenous Cultural C	ommunities,
they are bonance member of the	andethnic tribes, respe	ctively.
	MUNICIPAL TRIBAL CHIEFTAIN	
SUBSCRIBED AND SWORN to before me this At Affiant exhiissued at	_ day of 20,	
SUBSCRIBED AND SWORN to before me this At Affiant exhi issued at On	_ day of 20,	

Republic of the Philippines



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Province of		
Municipality of		
Barangay of		
	Date	
To Whom It May Concern:		
THIS IS TO CERTIFY THAT Mr. / Mrs. / Ms		
and Mrs.	of the	spouses Mr -
of and Mrs. they are bonafide member of the	belong to the Indigenous Cultura andethnic tribes, re	al Communities espectively.
This certification is issued upon the request application for Tribal Membership Certification.	of the above named spouses / applicant	to support thei
	BARANGAY TRIBAL CHIEFTAIN	_
SUBSCRIBED AND SWORN to before me this At Affiant exhi issued at On	bited to me his / her Residence Certificate	e No.
(CTM FORM NO. 4) MIPA - BARMM	(Office Administering Oath) Judge, Fiscal, Clerk of Courts, Mayor & Notary Public	_
Republic of	the Philippines	

Province of _____



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	Municipality of			
	Barangay of			
	OFFICE OF THE BARAN	ngay Chairman		
			Date	
TO WHOM IT MAY C	CONCERN :			
THIS IS TO	CERTIFY THAT Mr./Mrs./Ms		of	
spouses Mr.	and	and a Mrs.	of the	C
	belong to the Indigenousand	Cultural Communities,	they are bonafide me	
		BARANGAY	CHAIRMAN	
SUBSCRIBEI At	D AND SWORN to before me this . Affiant exhibited to me h issued at	day of nis/her Residence Certi on	20, ficate No. 	
		(Officer Admini Judge, Fiscal, O Mayor & No	Clerk of Courts	
REPUBLIC OF THE	HE PHILIPPINES)	/c c		

JOINT AFFIDAVIT OF TWO-DISINTERESTED PERSONS

MUNICIPALITY / CITY_____



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We	and	both of legal age,
WeFilipino single/married and bonafide	residents of	and
		. After having sworn in accordance
with the law, do hereby depose and sa	yetn.	
That we know persona	lly	and
	·	
That after couple of year		ouple have a child born name born child.
That	is a	member of the tribal communities
belonging to the		
		and mother
		belonging to the
and		tribes respectively.
membership of		
		ır signatures this day
	,, Philippi	nes.
	, т.ш.рр.	
(Affiant)		(Affiant)
Res. Certificate No	Res. Certific	ate No
Issued on		
Issued at	Issued at	
SUBSCRIBE AND SWORN	to before me, this	day of at
	N	otary Public