

Hoopa Valley Tribe Enrollment Department

Post Office Box 1348 Hoopa, California 95546
Phone (530)-625-4364 Fax (530)-625-4947

REQUEST FOR INFORMATION

DATE: _____

TO: _____

I wish to request the following information from Enrollment or reports from the Progeny ES data system:

Print Name: _____

Department: _____

Signature: _____ Date: _____

ACTION ON REQUEST

_____ APPROVED _____ DISAPPROVED

If Disapproved provide reason: _____

Signed: _____ Date: _____
Hoopa Valley Chairman

COMMENTS: _____
