



COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

NORTHERN MARIANAS DESCENT AFFIDAVIT OF REGISTRATION APPLICATION



I am currently registered to vote on (if applicable):

Island of Saipan – Election District: _____

Island of Tinian – Election District 6

Island of Rota – Election District 7

IMPORTANT: PLEASE PRINT
CLEARLY IN BLACK INK.
FAILURE TO COMPLETE ALL
ITEMS MAY PREVENT
ACCEPTANCE OF THIS
APPLICATION.

CEC OFFICE USE ONLY:

Affidavit No:

NMDR-_____

I HEREBY SWEAR (OR AFFIRM) THAT THE FOLLOWING INFORMATION IS TRUE AND CORRECT:

1	Last Four (4) Digits of Social Security Number XXX-XX- _____	2	Date of Birth ____ / ____ / ____	3	Gender (Circle One) Male Female
4	Full Legal Last Name	First Name		Middle	
5	Physical Residence Address Only (Must be completed. P.O. Box or General Delivery is not acceptable)		Island	ZIP Code	
6	Mailing Address (Street Address, P.O. Box or General Delivery)		Island	ZIP Code	
7	Telephone Contact Information			8	Established CNMI Residency Since
9	I was last registered to vote under (Give previous legal last name, first name and middle name, <u>if applicable</u>)		Island	ZIP Code	
10	<div style="text-align: center;"><u>Oath</u></div> <p>I declare under penalty of perjury that I am a person who is a citizen or national of the United States and who has at least some degree of Northern Marianas Chamorro or Northern Marianas Carolinian blood. For purposes of determining Northern Marianas descent, a person shall be considered to be a full blooded Northern Marianas Chamorro or Carolinian if that person was born or domiciled in the Northern Mariana Islands by 1950 and was a citizen of the Trust Territory of the Pacific Islands before the termination of the Trusteeship with respect to the Commonwealth. (Note: Northern Mariana Islands Constitution Article XII § 4, states that “any person who has less than one quarter Northern Marianas (NM) Chamorro or Carolinian blood or a combination thereof, shall provide evidence to support that he/she possess some degree of NM Chamorro or Carolinian blood to the Superior Court who shall certify that such individual meets the NM descent requirements.)</p> <p>Executed this _____ day of _____, 20____ at _____, _____.</p> <p style="text-align: center;">Day Month Year City/Island State</p> <p>Signature _____ Date: _____</p>				
11	Witness Signature (required only if applicant makes a mark as signature)		Witness Address/Contact Information		Date

Warning: Any person who knowingly falsifies information may be guilty of a Class C Felony, punishable by up to 5 years of imprisonment and/or \$10,000 fine.