

Cherokee Council House  
Cherokee, North Carolina

\_\_\_\_\_  
Date

RESOLUTION NO. \_\_\_\_\_(2022)

*Electronic Tribal Census*

WHEREAS, there exists an ongoing need for a tribal census to satisfy requirements within the Charter and Governing Document and Cherokee Code Section 117-12 for the Eastern Band of Cherokee Indians (EBCI); and

WHEREAS, there exists a need to acquire updated information for EBCI Enrollment purposes; and

WHEREAS, there exists a need to acquire local demographic information on the households within the EBCI townships to better inform EBCI officials within areas of priority for decision making purposes; and

WHEREAS, to best address these statistical areas in a timely and efficient process, the implementation of an electronic tribal census should include prioritized questions of need.

NOW, THEREFORE, BE IT RESOLVED by the Eastern Band of Cherokee Indians in Tribal Council Assembled, at which a quorum is present that the Tribal Council of the Eastern Band of Cherokee Indians does hereby authorize an electronic tribal census to occur with questions as attached.

BE IT ADDITIONALLY RESOLVED that this resolution be carried out by the Principal Chief.

BE IT FINALLY RESOLVED that all resolutions inconsistent with this resolution are rescinded, and that this resolution shall become effective when ratified by the Principal Chief.

*Submitted by: Office of Principal Chief Richard G. Sneed*

EBCI Census – Question Breakdown

1. Name

\* Name

*First, Middle Initial, Last*

*John, NMN, Smith (Example No Middle Name)*

*John, P, Smith*

2. NickName

NickName

*Nickname or Alias*

*A name you are known by that does not match your legal name.*

3. EBCI Enrollment #

\* EBCI Enrollment #

*R12345*

*B54321*

*(Example)*

4. Age

\* Age

*Must be 18 years of age to fill out this Census Survey.*

Range: 18 - 120

5. Residence

\* Residence

-- choose --

-- choose --

On EBCI Trust Property

Off EBCI Trust Property

6. On EBCI Trust Property

a. On EBCI Trust – Township

\* On EBCI Trust - Township

-- choose --

-- choose --

Birdtown

Big Cove

Yellowhill

Wolftown

Cherokee County/Snowbird

Painttown

b. On EBCI Trust - Physical Address

\* On EBCI Trust - Physical Address

*88 Council House Loop*

*Cherokee, NC 28719*

*(Example)*

c. On EBCI Trust - Mailing Address

\* On EBCI Trust - Mailing Address

*P.O. Box 455*

*Cherokee, NC 28719*

*(Example)*

7. Off EBCI Trust Property

\* Off EBCI Trust Property

-- choose --

-- choose --

Within the United States

Outside the United States

a. Within the United States

i. Off EBCI Trust - US State/Territory  
(Full Choice of 50 States and Territories)

\* Off EBCI Trust - US State/Territory

ii. Off EBCI Trust - US Physical Address

\* Off EBCI Trust - US Physical Address

*88 Council House Loop*

*Cherokee, NC 28719*

*(Example)*

iii. Off EBCI Trust - US Mailing Address

\* Off EBCI Trust - US Mailing Address

*P.O. Box 455*

*Cherokee, NC 28719*

*(Example)*

b. Outside the United States

i. Off EBCI Trust - Foreign Country

\* Off EBCI Trust - Foreign Country

*Canada, Mexico, etc.*

ii. Off EBCI Trust - Foreign Physical Address

\* Off EBCI Trust - Foreign Physical Address

*1010 CLEAR ST*

*OTTAWA ON K1A 0B1*

*CANADA*

*(Example)*

iii. Off EBCI Trust - Foreign Mailing Address

\* Off EBCI Trust - Foreign Mailing Address

*1010 CLEAR ST*

*OTTAWA ON K1A 0B1*

*CANADA*

*(Example)*



8. Highest level of education or training completed?

**Education:**

\* Highest level of education or training completed?

-- choose --

-- choose --

No schooling completed.  
Nursery school.  
Grades 1 through 11.  
12th grade—no diploma.  
Regular high school diploma.  
GED or alternative credential.  
Some college credit, but less than 1 year of college.  
P Associates degree (for example: AA, AS)  
Bachelor's degree (for example: BA, BS)  
Master's degree (for example: MA, MS, MEng, MEd, MSW, MBA)  
Professional degree beyond bachelor's degree (for example: MD, DDS, DVM, LLB, JD)  
Doctorate degree (for example, PhD, EdD)  
Trade School Diploma

9. Are you a Veteran?

\* Are you a Veteran?

-- choose --

Yes / No

10. Are you employed?

\* Are you employed?

-- choose --

Yes / No

a. Yes

i. Employment Type?

\* **Employment Type?**

-- choose --

-- choose --

Full Time

Part Time

11. Do you have access to fresh fruits and vegetables?  
Yes / No
12. Do you have access to broadband service?  
Yes / No
13. Household income?

\* **Household income?**

-- choose --

-- choose --

Less than \$20,000

\$20,000 to \$34,999

\$35,000 to \$49,999

\$50,000 to \$74,999

\$75,000 to \$99,999

Over \$100,000

14. How many people in your household?

\* **How many people in your household?**  
*(Total including yourself.)*

Range: 1 - 99



15. In your household do you have?

In your household do you have?

- Other EBCI enrolled citizens?
- First descendants?
- Non-enrolled citizens?

a. How many other EBCI enrolled citizens?

\* How many other EBCI enrolled citizens?

Range: 1 - 20

b. How many other EBCI enrolled citizens?

\* How many first descendants?

Range: 1 - 20

c. How many non-enrolled citizens?

\* How many non-enrolled citizens?

Range: 1 - 20

16. Do you have access to a vehicle?

Yes / No

17. Do you have access to public transportation?

Yes / No

18. Do you have access to housing?

Yes / No

a. Yes

i. Housing Type?

\* Housing Type?

-- choose --

-- choose --

I have a mortgage

C I own my home

I rent

b. No

i. Optional: Provide additional information on your housing situation?

Optional: Provide additional information on your housing situation?

19. Do you know your clan?

Yes / No

a. Yes

i. Which clan do you belong to?

\* Which clan do you belong to?

-- choose --

-- choose --

Deer

Wolf

Bird

Long Hair

Paint

Blue

Wild Potato

ii. Does anyone in the household speak Cherokee?

\* Does anyone in the household speak Cherokee?

-- choose --

-- choose --

No

H Yes - Beginner

Yes - Intermediate

Yes - Advanced

20. Are there immunocompromised members in household?

Yes / No / Prefer not to say

21. Are there people in household with diabetes?

Yes / No / Prefer not to say

22. Do you have health insurance?

Yes / No

23. Are you caring for children that are not your biological children?

Yes / No

24. Do you feel safe?

Yes / No

a. Yes

b. No

i. Where do you feel unsafe?

\* Where do you feel unsafe?

In my household

In my community

ii. Optional: Provide additional feedback on safety?

Optional: Provide additional feedback on safety?

25. Do you live paycheck to paycheck?

Yes / No

26. Do you have money saved in case of an emergency?

Yes / No