

Fourth Judicial District, El Paso County District Court, Colorado  
270 S. Tejon Street, Colorado Springs, Colorado 80903

THE PEOPLE OF THE STATE OF COLORADO:

In the Interest of

\_\_\_\_\_  
Child(ren) and Concerning

\_\_\_\_\_  
Respondent Mother Father Guardian

COURT USE ONLY

\_\_\_\_\_  
Case Number:

Division:

AMERICAN INDIAN/ALASKA NATIVE INDIAN CHILD WELFARE ACT (ICWA) ASSESSMENT FORM

### ICWA-I

#### Section I: Information about Child(ren):

Child's Name First and Last	Date of Birth	Place of Birth	Eligible for Tribe Membership?	Member of one or more tribes?	If yes or unknown, provide Tribe Name
			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
			<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	

**Does a Member of the Child's Family have AI/AN heritage?** Yes No

If the child is eligible for membership in a tribe, has a family member with AI/AN heritage or you are not sure, parties are to complete the full ICWA-2.

\_\_\_\_\_  
Printed name

\_\_\_\_\_  
Relationship to Child

\_\_\_\_\_  
Parent or Guardian Signature

\_\_\_\_\_  
Date

This form is part of an ongoing inquiry and should be completed by the caseworker after gathering information from a knowledgeable parent, guardian or family member on behalf of the child whose tribal status is in question. The information should be reviewed and updated periodically throughout the pendency of the case.