

**CONSTITUENT SERVICES  
OFFICE OF THE PRINCIPAL CHIEF**

627 GRANDVIEW

PAWHUSKA, OK 74056

FAX: (918)287-5221 OR (918)691-5221

E-MAIL: [constituentservices@osagenation-nsn.gov](mailto:constituentservices@osagenation-nsn.gov)



## **COLORS OF REMEMBRANCE REQUIRED DOCUMENTS AND PROCESS**

### **REQUIRED DOCUMENTATION**

- Submit an application
- Provide a copy of Osage Membership Card for deceased individual
- Provide a copy of Form DD-214 Honorable Discharge verification if an Osage War Veteran.

### **BENEFIT**

The Osage Nation now has policy backed by process to formally honor Osage War Veterans, Elected Officials, and Tribal Police Officers killed in the line of duty.

### **PROCESS**

1. Submit Colors of Remembrance Veteran Status Form with a copy of the Osage Nation Membership Card.
2. Submit supporting document: Form DD-214 Verification of Honorable Discharge.
3. The application is complete when all pertinent documents are received.
4. A request will be submitted by the Constituent Services Office to the Director of Operations to confirm verification of all submitted documents.
5. A request will then be submitted by the Constituent Services Office to all Osage Nation locations notifying them to lower their flag to half-staff and the length of time the flag must remain at half-staff.
6. The Director of Operations will lower the flag located at the Office of the Chiefs to half-staff for a length of time not to exceed interment. If DO is not available, the colors will be moved by the Chief of Staff or the Governmental Affairs Advisor.

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## **COLORS OF REMEMBRANCE FORM**

### **SECTION 1: APPLICANT CONTACT INFORMATION *(Please print)***

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<b>LAST NAME</b>	<b>FIRST NAME</b>	<b>M.I.</b>
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<b>ADDRESS</b>	<b>CITY</b>	<b>STATE</b>	<b>ZIP CODE</b>
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<b>PHONE NUMBER</b>	<b>MESSAGE PHONE NUMBER</b>	<b>E-MAIL ADDRESS</b>
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### **SECTION 2: DECEASED OSAGE MEMBER INFORMATION *(Please print)***

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<b>LAST NAME</b>	<b>FIRST NAME</b>	<b>M.I.</b>	<b>(MAIDEN LAST NAME)</b>
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<b>DATE OF BIRTH</b>	<b>DATE OF DEATH</b>	<b>OSAGE MEMBERSHIP NUMBER</b>
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### **SECTION 3: BRANCH OF MILITARY/OFFICIAL POSITION INFORMATION *(Please print)***

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<b>Branch of Military</b>	<b>Title</b>
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<b>Elected Official</b>	<b>Title</b>
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<b>Osage Nation Police Department</b>	<b>Title</b>
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