SCCHGS
C/O Central Park Library
2635 Homestead Road
Santa Clara CA 95051

APPLICATION FOR CERTIFICATE OF RECOGNITION OF EARLY SETTLERS

Categories of Recognition:

- First Family – Ancestor resident in Santa Clara County before 1860.
- Pioneer Family – Ancestor resident in Santa Clara County by 1860 but before 1881.
- Century Family – Ancestor resident in Santa Clara County at least 100 years prior to application date.

Please review the Requirements for Application and Recognition contained in the Program Description.

NAME OF APPLICANT _____
Surname First Name Middle Name

NAME OF ORIGINAL SETTLER _____
Surname First Name Middle Name

NAME OF SPOUSE OF
ORIGINAL SETTLER
(if including in application)_____
Surname First Name Middle Name

CATEGORY OF RECOGNITION FOR WHICH YOU ARE APPLYING _____

Attach to this Application:

A Family Group Sheet for each generation beginning with the Applicant to and including the Original Settler. The children listed on each Family Group Sheet must AT LEAST include the Applicant and the Applicant's direct line ancestors leading back to the Original Settler.

A Pedigree Chart beginning with the Applicant and extending back to and including the Original Settler.

Copies of documents proving each fact on each Family Group Sheet and the Pedigree Chart. Please refer to the Program Description for acceptable documents.

A check made payable to SCCHGS for $20 if applicant is a current member of the Santa Clara County Historical and Genealogical Society or $25 if applicant is not a current member. This application amount is non-refundable.

Mail or Deliver all materials to the Society at the above address to the attention of "Early Settlers Certificate Program".

Upon receipt, all materials will become the property of the Santa Clara County Historical and Genealogical Society. Unsigned applications will not be processed.

My signature here acknowledges that I have read and understand the Program Description and agree to the terms of this application as outlined in that Description.

Signature of Applicant: _____