

## Tribal Representative and Delegation of Authority

This form should be used to designate a tribal representative who is given the authority to represent and speak on behalf of the federally recognized tribal government for consultation on the nationwide public safety broadband network, and to request/attend a formal consultation on behalf of tribal officials. This form should accompany a written Delegation of Authority, on tribal letterhead and bearing the appropriate tribal leadership's signature.

*This completed form and Delegation of Authority should be sent to:*

Tribal Consultation  
First Responder Network Authority  
12201 Sunrise Valley Drive, Stop 243  
Reston, VA 20192-0002

-OR- [tribal.consultation@firstnet.gov](mailto:tribal.consultation@firstnet.gov)

Upon receipt of the completed form and signed Delegation of Authority, a confirmation letter will be sent to the designated representative.

**Name of Tribe:** \_\_\_\_\_

**Name of Representative:** \_\_\_\_\_

**Title of Representative:** \_\_\_\_\_

**Address:** \_\_\_\_\_

\_\_\_\_\_

**Telephone:** \_\_\_\_\_

**Email:** \_\_\_\_\_

**Duration** (please select one):

- Until otherwise noted
- Until the following date: \_\_\_\_\_

*By signing below, I represent that I have been authorized, on behalf of the above federally recognized tribal government, to make this request and have attached written Delegation of Authority.*

\_\_\_\_\_  
(Signature of individual submitting request)

\_\_\_\_\_  
(Please print name clearly)