



Application for Birth Certificate

*(Please note that **all** sections of this form **must** be completed wherever possible)*

I hereby apply for [] Certified Copy(s) of the Birth Certificate for the following person:

PARTICULARS OF BIRTH

Date of Birth: _____ **Sex** Male [] Female []
(DD) (MMM) (YYYY) :

First Name of Child _____

Middle Name(s) 1. _____ 2. _____ 3. _____ 4. _____

Surname of Child _____

Type of Birth: Live [] Still Birth [] **Alias:** _____

Birth Centre Name: _____ **Birth Record #:** _____ **Reg. date:** _____
(DD-MMM-YYYY)

Was any of the names given at birth changed? **Yes** [] **No** []

If yes, indicate the process: Deed Poll []; Change of name [] Amendment [] Marriage []

Date of change: _____/_____/_____

PARTICULARS OF MOTHER

First Name _____

Middle Name(s) _____ Alias: _____

Surname _____ Maiden Name _____

Address: _____

Country of Birth: _____

Date of Birth: _____
(DD) (MMM) (YYYY)

Occupation/Profession: _____

Civil Status of Mother:

Single [] Married [] Separated []

Number of births for the Mother: _____

Divorced [] Widowed []

Place of Marriage: _____

If married, date of Marriage:

(DD) (MMM) (YYYY)

Was your name changed at any time other than by marriage? Yes [] No []

If yes indicate the process: Deed Poll []; Certificate of Change of name [] Amendment []

Date of change: _____/_____/_____/

PARTICULARS OF FATHER

First Name _____

Middle Name(s) _____ Alias: _____

Surname _____

Address: _____

Country of Birth: _____

Date of Birth: _____
(DD) (MMM) (YYYY)

Occupation/
Profession: _____

Number of births for the Father: _____

Civil status of Father:

Single [] Married [] Separated [] Divorced []

Status of Father to Mother:

Widowed []

Spouse [] Partner []

If married, date of Marriage: _____
(DD) (MMM) (YYYY)

Place of Marriage: _____

Was your name changed at anytime: Yes [] No []

If yes, indicate the process: Deed Poll [];
Certificate of Change of name []; Amendment []

Date of change: _____/_____/_____/

Note(s): 1. MMM is related to the shortened form of the month instead of using the number (e.g. Jan, Feb, Oct)

PARTICULARS OF APPLICANT

<p>Full Name:</p> <p>Address:</p> <p>Relationship to the person if not in person</p> <hr/> <p>Reason for Applying (please tick)</p> <p><input type="checkbox"/> Driver's Licence <input type="checkbox"/> Passport <input type="checkbox"/> Visa</p> <p><input type="checkbox"/> Other</p> <p>_____</p> <p>_____</p> <p>Signature of Applicant:</p>	<p>Birth Registration Number:</p> <p>Email Address:</p> <p>Telephone Number: _____ (cell) _____</p> <p>_____ (home) _____ (work)</p> <p>Date of Application:</p> <p>_____/_____/_____/</p>
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FOR OFFICIAL USE ONLY

<p>Received by:</p> <hr/> <p>Date Received:</p> <p>____/____/____</p> <p>Completed by:</p> <hr/> <p>Completion Date:</p> <p>____/____/____</p>	<p>Supporting Documents:</p> <p>Type of ID:</p> <ul style="list-style-type: none">a. Passport;b. Social Securityc. Medical Benefitsd. Voter's IDe. Driver's License; orf. Notarised photograph ID <p>Other documents:</p> <hr/> <hr/> <hr/> <hr/> <hr/> <p>Comments/Special Instructions:</p> <hr/> <hr/> <hr/> <hr/> <hr/>
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Note(s): 1. **MMM** is related to the shortened form of the month instead of using the number (e.g. Jan, Feb, Oct)