

Birth Records Self-Help Kit

Section 8:

Forms



Forms Revised 04/09



List of Forms

“**Forms**” are blank documents that you fill out and submit to the court in order to complete the process outlined in this guide. You should make copies of all the forms you have to submit before you start filling them out, in case you make a mistake you can’t erase. We recommend that each form be printed out as a single page, eliminating any double-sided printing.

- **Form A** is a blank **petition and declaration on pleading paper**. This is also called a **Verified Petition and Declaration to Unseal Birth Records and Adoption Information**. You can copy this form and use a typewriter to fill in the information, following the instructions in **Resource A**.
- **Form B** is a blank **order to unseal birth records and adoption information to the Department of Social Services**. This is also called a **Department of Social Services Order to Unseal Birth Records and Adoption Information**. You can copy this form and use a typewriter to fill in the information, following the instructions on **Resource B**.
- **Form C** is a blank **order to unseal birth records and adoption information to the California Office of Vital Records**. This is also called a **California Office of Vital Records Order to Unseal Birth Records and Adoption Information**. You can copy this form and use a typewriter to fill in the information, following the instructions on **Resource C**.
- **Form D** is a **third party’s blank declaration on pleading paper**. You can copy this form and use a typewriter to fill in the information, following the instructions in **Resource D**.
- **Form E** is **blank pleading paper**. These extra pieces of pleading paper can be copied and used if you run out of room in your petition and want to write the judge about other facts in your case; if you want to attach photographs as evidence; and/or if your third party runs out of room in their declaration.
- **Form F** is a blank **Certified Birth Certificate Request Form (VS 111)**. You can copy this application, and use a typewriter to fill in the information, following the instructions on Page 2 of the form. Page 3 of the form is a Sworn Statement. Bring this form with you to the notary public so you can sign it in front of them, and have it notarized. (Remember, you have to use the VS 111 form to get **any** certified copy of your birth certificate, whether it is your adoptive birth certificate or your original birth certificate.)

Form A

Verified Petition and Declaration to Unseal Birth Records and Adoption Information

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In Propria Persona

IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA
IN AND FOR THE COUNTY OF

In the Matter of)
Case No.: (assigned by the court)
)
)
) **VERIFIED PETITION AND**
) **DECLARATION TO UNSEAL BIRTH**
) **RECORDS AND ADOPTION**
) **INFORMATION**
)

TO THIS HONORABLE COURT:

Petitioner, , seeks an order from this Court granting petitioner’s access to petitioner’s birth records and adoption information for the purpose of determining in which Indian tribe petitioner’s birth parent claimed membership. Upon such determination, petitioner will pursue enrollment in that tribe as well as all rights flowing from that relationship.

I, , declare as follows:

1. On information and belief, I was born on at in , . My original birth name is .

1 2. On _____, this Court ordered my adoption to _____ under
2 the name _____. My Case File Number is _____.

3 3. Attached hereto as Exhibit A is a true and correct copy of my Adoptive Birth
4 Certificate.

5 4. On _____, I married _____. My legal name is now
6 _____ . Attached hereto as Exhibit B is a true and correct
7 copy of the Marriage Certificate of _____.

8 5. On information and belief, my birth _____ born in
9 _____ and was American Indian. I do not know my birth parents' names, dates of
10 birth or in which tribe _____ held membership _____.

11 6. On information and belief, my birth _____ was born in _____.

12 7. On information and belief,
13 _____ . Also see _____ .
14 Attachment/Declaration of _____, for additional detail.

15 8. On information and belief, I believe I am American Indian. I
16 petition as follows.

17 9. On information and belief, I believe I am American Indian but I currently have little or
18 no legal proof of my Indian ancestry. Without legal proof, I am unable to enroll with a tribe or
19 establish my status as an Indian person. As a result I am not able to access programs and funding
20 available to Indian people.

21 10. California Family Code §9200 recognizes that the judge of the superior court may
22 authorize inspection of documents filed in adoption proceedings in exceptional circumstances
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1 and for good cause approaching the necessitous. The documents which may be disclosed
2 according to the discretion of the superior court are specified in §9200:

3 The petition, relinquishment or consent, agreement, order, report to the court from any
4 investigating agency, and any power of attorney and deposition filed in the office of the
5 county clerk pursuant to this part is not open to the inspection by any person other than
6 the parties to the proceeding and their attorneys and the department, except upon the
7 written authority of the judge of the superior court. A judge of the superior court may not
8 authorize anyone to inspect the petition, relinquishment or consent, agreement, order . . .
9 except in exceptional circumstances and for good cause approaching the necessitous.
10

11 11. The Indian Child Welfare Act (“ICWA”), 25 U.S.C. § 1901 et. seq., California
12 Family Code § 9209(a) and the California Health and Safety Code § 102705, provide the basis
13 for this petition.
14

15 12. ICWA section 25 U.S.C. § 1917 specifically provides as follows:
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17 Upon application by an Indian individual who has reached the age of eighteen
18 and who was the subject of an adoptive placement, the court which entered the
19 final decree shall inform such individual of the tribal affiliation, if any, of this
20 individual’s biological parents and provide such other information as may be
21 necessary to protect any rights flowing from the individual’s tribal
22 relationship. 25 U.S.C. § 1917.

23 13. California Family Code § 9209(a) mirrors a similar language as follows:
24

25 Upon application by an Indian individual who has reached the age of 18 years
26 and who was the subject of an adoptive placement, the court which entered the
27 final decree of adoption shall inform that individual of the tribal affiliation, if
28 any, of the individual's biological parents and provide any other information

1 as may be necessary to protect any rights flowing from the individual's tribal
2 relationship, including, but not limited to, tribal membership rights or
3 eligibility for federal or tribal programs or services available to Indians.

4
5 14. In order for a tribe to enroll a person who is eligible for enrollment but has been
6 adopted, the adoptee must furnish the tribe with proof, among other things, that he/she is a
7 descendant of a member of the tribe. Most tribes require a certified copy of an original birth
8 certificate.

9
10 15. On information and belief, the applicable state law allows access to birth records
11 when a petitioner files “a verified petition setting forth facts showing the necessity of such an
12 order” granting access. Cal. Health and Safety Code § 102705. On information and belief, a
13 petitioner may determine the names and addresses of the birth parents if they “are necessary to
14 assist . . . in establishing a legal right.” Cal. Health and Safety Code § 102705.

15
16 16. California Health and Safety Code § 102705 states as follows:

17 All records and information specified in this article, other than the newly
18 issued birth certificate, shall be available only upon the order of the superior
19 court of the county of residence of the adopted child or the superior court of
20 the county granting the order of adoption.

21 No such order shall be granted by the superior court unless a verified petition
22 setting forth facts showing the necessity of the order have been presented to
23 the court and good and compelling cause is shown for the granting of the
24 order. The clerk of the superior court shall send a copy of the petition to the
25 State department of Social Services and the department shall send a copy of
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1 all records and information it has concerning the adopted person with the
2 name and address of the natural parents removed to the court. The court
3 must review these records before making an order and the order should so
4 state. If the petition is by or on behalf of an adopted child who has attained
5 majority, these facts shall be given great weight, but the granting of any
6 petition is solely within the sound discretion of the court.
7

8 The name and address of the natural parents shall be given to the petitioner
9 only if he or she can demonstrate that the name and address, or either of
10 them, are necessary to assist him or her in establishing a legal right.
11

12 17. I am currently seeking the identity of my birth and my birth
13 tribe so that I can pursue enrollment as a member of that tribe. My claim to such membership is
14 based upon my belief that my birth an American Indian, and my relatives
15 would presumably be registered members of that tribe. In order for a tribe to enroll me as a tribal
16 member, I must furnish it with proof, among other things, that I am a descendant of a member of
17 the tribe. On information and belief, I can satisfy a tribe's enrollment requirements by providing
18 a certified copy of my original birth certificate.
19

20 18. On information and belief, I state that the California Department of Social Services
21 maintains files regarding my adoption.
22

23 19. On information and belief, I state that the California Office of Vital Records keeps
24 my original birth certificate under seal, and this seal can be broken only upon order of the court.
25

26 **WHEREFORE, petitioner prays that the Court:**

27 1. Order the California State Department of Social Services and/or any other state or
28 local agency having custody of subject records, no later than two (2) months from the date of the

1 order, to provide the Court with all records and information concerning petitioner pursuant to
2 California Health and Safety Code § 102705 and California Family Code § 9209(a).

3 2. Order the State Office of Vital Records and/or any other state or
4 local official having custody of subject records, no later than two (2) months from the date of the
5 order, to permit petitioner to obtain and inspect said records, including but not limited to a
6 certified copy of petitioner's original birth certificate.

7
8 3. Grant such other and further relief as the Court may deem just and proper.

9 DATED: _____ SIGNED: _____

10
11 **VERIFICATION**

12 I declare under penalty of perjury that I have personal knowledge of the foregoing
13 allegations and that they are true and correct except where stated on information and belief, and
14 as to those matters I believe them to be true.
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16 Executed at _____, on _____, 20____.

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19 DATED: _____ SIGNED: _____

Form B

Order to Unseal Birth Records and Adoption Information to the Department of Social Services (DSS Order)

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In Propria Persona

IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA
IN AND FOR THE COUNTY OF

In the Matter of)
Case No.: (assigned by the court)
)
)
) **DEPARTMENT OF SOCIAL SERVICES**
) **ORDER TO UNSEAL BIRTH RECORD**
) **AND ADOPTION INFORMATION**
)
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The Court, having received the petition of _____ requesting access to petitioner's
birth records and adoption information, including but not limited to the original birth certificate,
and good cause having been found therefore, hereby

ORDERS the CALIFORNIA STATE DEPARTMENT OF SOCIAL SERVICES and/or
any other state or local official having custody of subject records, no later than two (2) months
from the date of this order, to provide this Court with all records and information concerning
petitioner pursuant to California Health and Safety Code § 102705, California Family Code §
9209(a) and the Indian Child Welfare Act.

DATED: _____ SIGNED: _____
Superior Court Judge

Form C

Order to Unseal Birth Records and Adoption Information to the State Office of Vital Records (Vital Records Order)

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In Propria Persona

IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA

IN AND FOR THE COUNTY OF

In the Matter of	}	Case No.: (assigned by the court)
	}	
	}	STATE OFFICE OF VITAL RECORDS
	}	ORDER TO UNSEAL BIRTH RECORD
	}	AND ADOPTION INFORMATION
	}	

The Court, having received the petition of _____ requesting access to petitioner's birth records and adoption information, including but not limited to the original birth certificate, having reviewed the records of petitioner provided by the California State Department of Social Services and good cause having been found therefore, hereby

ORDERS the _____ STATE DEPARTMENT OF PUBLIC HEALTH'S OFFICE OF VITAL RECORDS and/or any other state or local official having custody of subject records, no later than two (2) months from the date of this order, to provide this Court with such records and to permit petitioner to obtain and inspect said records, including but not limited to the UNREDACTED original birth certificate, and further

///

1 ORDERS that petitioner be allowed to obtain certified copies of said records as needed
2 by petitioner.

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4 DATED: _____

SIGNED: _____
Superior Court Judge

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Form D

Third Party's Declaration on Pleading Paper

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In Propria Persona

IN THE SUPERIOR COURT OF THE STATE OF CALIFORNIA

IN AND FOR THE COUNTY OF

In the Matter of

) Case No.: (assigned by the court)

)
)
) **DECLARATION IN SUPPORT OF**
) **PETITION TO UNSEAL BIRTH**
) **RECORDS AND ADOPTION**
) **INFORMATION**
)

I, _____, declare, under penalty of perjury, as follows:

- 1. I am a resident of _____ County, California.
- 2. I have known the Petitioner for _____ years.
- 3. Petitioner is my _____.
- 4. On information and belief, I believe that the Petitioner has American Indian Ancestry

because: _____

- 5. I can be contacted to provide testimony, if needed.

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VERIFICATION

I declare under penalty of perjury that I have personal knowledge of the foregoing allegations and that they are true and correct except where stated on information and belief, and as to those matters I believe them to be true.

Executed at _____, on _____, 20 .

Signed: _____

Declarant: _____

Form E

Blank Pleading Paper

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Form F

Application for Certified Copy of Birth Record

APPLICATION FOR CERTIFIED COPY OF BIRTH RECORD

DO NOT Complete This Application Before Reading the Instructions on Page 2

In an attempt to stop the illegal use of vital records, and as part of statewide efforts to reduce identity theft, a new law (effective July 1, 2003) changed the way certified copies of birth certificates are issued. **Certified Copies** to establish the identity of a registrant can be issued only to authorized individuals, as indicated below. All others will be issued **Certified Informational Copies** that **are not** valid to establish identity.

Fee: **\$14 per copy** (payable to the Office of Vital Records).

Please indicate the type of certified copy you are requesting:

<input type="checkbox"/> I would like a Certified Copy . This copy will establish the identity of the registrant. (To receive a Certified Copy you MUST INDICATE YOUR RELATIONSHIP TO THE REGISTRANT by selecting from the list below AND COMPLETE THE ATTACHED SWORN STATEMENT declaring that you are eligible to receive the Certified Copy. The Sworn Statement MUST BE NOTARIZED if the application is submitted by mail unless you are a law enforcement or local or state governmental agency.)	<input type="checkbox"/> I would like a Certified Informational Copy . This document will be printed with a legend on the face of the document that states, "INFORMATIONAL, NOT A VALID DOCUMENT TO ESTABLISH IDENTITY." (A Sworn Statement does not need to be provided.)
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NOTE: Both documents are certified copies of the original document on file with our office. With the exception of the legend, the documents contain the exact same information.

To receive a **Certified Copy** I am:

- The registrant (person listed on the certificate) or a parent or legal guardian of the registrant.
- A party entitled to receive the record as a result of a court order, or an attorney or a licensed adoption agency seeking the birth record in order to comply with the requirements of Section 3140 or 7603 of the Family Code.
- A member of a law enforcement agency or a representative of another governmental agency, as provided by law, who is conducting official business. *(Companies representing a government agency must provide authorization from the government agency.)*
- A child, grandparent, grandchild, brother or sister, spouse, or domestic partner of the registrant.
- An attorney representing the registrant or the registrant's estate, or any person or agency empowered by statute or appointed by a court to act on behalf of the registrant or the registrant's estate. *(If you are requesting a Certified Copy under a power of attorney, please include a copy of the power of attorney with this application form.)*

APPLICANT INFORMATION (PLEASE PRINT OR TYPE) Today's Date: _____

Agency Name (if appropriate)		Agency Case No. (if appropriate)	Purpose of Request		
Printed Name and Signature of Applicant			Number of Copies	Amount Enclosed	
Mailing Address – Number, Street			Name of Person Receiving Copies, if Different from Applicant		
City	State / Province	ZIP Code	Mailing Address for Copies, if Different from Applicant		
Daytime Telephone (include area code) ()		Country	City	State	ZIP Code

BIRTH CERTIFICATE INFORMATION (PLEASE PRINT OR TYPE) Adopted: No Yes (If Yes, see #4 on Page 2)

BIRTH Name on Certificate (LAST)		FIRST Name on Certificate	MIDDLE Name on Certificate
City of Birth (must be in California)		County of Birth	
Date of Birth – MM/DD/CCYY (If unknown, enter approximate date of birth)		Sex <input type="checkbox"/> Female <input type="checkbox"/> Male	
BIRTH Name on Certificate – Father/Parent	FIRST Name on Certificate – Father/Parent	MIDDLE Name on Certificate – Father/Parent	
BIRTH Name on Certificate – Mother/Parent	FIRST Name on Certificate – Mother/Parent	MIDDLE Name on Certificate – Mother/Parent	

INFORMATION: Birth records have been maintained in the Office of the State Registrar of Vital Records since July 1, 1905.

The "Birth" name required on Vital Records (see Items 1C, 6C, 7C, 9C, and 12C) is the name given at birth, or a name received through adoption, court-ordered name change, or Naturalization. AKA's (Also Known As) and assumed names cannot be entered as the legal "Birth" name.

INSTRUCTIONS:

1. As of July 1, 2003, **ONLY** individuals who are authorized by Health and Safety Code Section 103526 can obtain a Certified Copy of a Birth Record to establish identity of the registrant (person listed on the certificate). (Page 1 identifies the individuals who are authorized to make the request.) All others may receive a Certified Informational Copy which will be marked, "Informational, Not a Valid Document to Establish Identity."

Confidential Information on Birth Record: Some individuals have special needs for a birth certificate that contains the confidential information provided at the time the birth record was prepared. This confidential information may be used to establish ethnicity, to provide health background, or for other personal reasons. For information on how to obtain a birth certificate containing the confidential information, please refer to the Birth Certificate section of our website: www.cdph.ca.gov (then select "Services"). Only specific individuals may obtain confidential copies.

2. Complete a separate application for each birth record requested.
3. Complete the **Applicant Information** section on Page 1 and provide your signature where indicated. In the **Birth Certificate Information** section, provide all the information you have available to identify the birth record. If the information you furnish is incomplete or inaccurate, we may not be able to locate the record.
4. **If the registrant has been adopted**, make the request in the **adopted** name. (If you're requesting a copy of the **original** birth certificate, you **must** provide a court order releasing the original sealed record.)

5. **SWORN STATEMENT:**

- The authorized individual requesting the certified copy must sign the attached Sworn Statement, declaring under penalty of perjury that they are eligible to receive the certified copy of the birth record, and identify their relationship to the registrant – the relationship must be one of those identified on Page 1.
- If the application is being submitted by mail, the Sworn Statement **must be** notarized by a Notary Public. (To find a Notary Public, see your local yellow pages or call your banking institution.) **Law enforcement and local and state governmental agencies are exempt from the notary requirement.**
- You do not have to provide a Sworn Statement if you are requesting a Certified Informational Copy of the birth record.

6. Submit \$14 for **each** copy requested. If no birth record is found, the \$14 fee will be retained for searching the record (as required by law) and a "Certificate of No Public Record" will be issued to the applicant. Indicate the number of copies you want and include the correct fee(s) in the form of a personal check or postal or bank money order (International Money Order for out-of-country requests) made payable to the **Office of Vital Records**. Mail this application with the fee(s) to the Office of Vital Records at the address below.

7. **Returning Completed Certificates:** Completed certificates are returned using the U.S. Postal Service.

Office of Vital Records - MS 5103
P.O. Box 997410
Sacramento, CA 95899-7410
(916) 445-2684

SWORN STATEMENT

I, _____, declare under penalty of perjury under the laws of the State of California,
 (Applicant's Printed Name)
 that I am an authorized person, as defined in California Health and Safety Code Section 103526 (c), and am eligible to receive a certified copy of the birth or death record of the following individual(s):

Name of Person Listed on Certificate	Applicant's Relationship to Person Listed on Certificate (Must Be a Relationship Listed on Page 1 of Application)

(The remaining information must be completed in the presence of a Notary Public or Office of Vital Records staff.)

Subscribed to this _____ day of _____, 20____, at _____,
 (Day) (Month) (City) (State)

 (Applicant's Signature)

Note: If submitting your order by mail, you must have your Sworn Statement notarized using the Certificate of Acknowledgment below. The Certificate of Acknowledgment must be completed by a Notary Public. (Law enforcement and local and state governmental agencies are exempt from the notary requirement.)

CERTIFICATE OF ACKNOWLEDGMENT

State of _____)

County of _____)

On _____ before me, _____, personally appeared _____,
 (here insert name and title of the officer)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument. I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.
 (SEAL)

 SIGNATURE





Bishop
Escondido
Eureka
Sacramento

California Indian Legal Services
Community Legal Education Self-Help Series
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