

Application for Search & Certified Copy of Birth Record

WE ONLY HAVE SHELBY COUNTY, INDIANA BIRTH RECORDS

Complete ALL ITEMS below

WARNING: False application to obtain or inspect, altering, mutilating, or counterfeiting Indiana Birth Certificates, or the use of such a certificate, is a criminal offense under IC 16-37-1-12. In accordance with Indiana Code 16-37-1-7, requests for birth certificates must include the information below. A permanent record of this request must be kept on file.

VALID IDENTIFICATION IS REQUIRED IN ACCORDANCE WITH IC 16-37-1-8

Full Name at Birth _____

Name after any legal or court ordered changes to birth certificate: _____

Date of birth _____ Check place of birth: Hospital _____ Home _____

Full name of Parent 1 _____

(MAIDEN name if applicable: if adopted, give name of adoptive parent)

Full name of Parent 2 _____

(MAIDEN name if applicable; if adopted, give name of adoptive parent)

Place of birth (if not a state put country): Parent 1 _____ Parent 2 _____

Purpose for which record is to be used _____

Your relationship to person's record you are requesting? _____

Your name (PLEASE PRINT) _____

Your signature _____

Address _____

City State Zip

Phone # _____

For Health Department Use Only:

Date Received _____ Form of ID: _____ Expires: _____

Standard _____ Standard & Wallet _____ Copy of PA _____ Method of Payment _____

Date Record Was Filed _____ File No. _____