# **Correcting a Birth Certificate**

#### Who Can Apply for a Correction?

- The person named on the birth certificate, if at least 18 years of age.
- Parent(s), legal guardian(s), managing conservator, or legal representative (proof required) of the person named on the certificate.
- Hospital or medical facility where the person named on the birth certificate was born.

WHEN SENDING IN THE APPLICATION, PLEASE INCLUDE A PHOTOCOPY OF VALID PHOTO ID(S) FOR THE PERSON(S) SIGNING SECTION 6. IF THE PERSON NAMED ON THE BIRTH CERTIFICATE IS A MINOR AND BOTH PARENTS' NAMES ARE ON THE BIRTH CERTFICATE, BOTH PARENTS MUST SIGN THE APPLICATION AND SUBMIT A PHOTOCOPY OF EACH PARENT'S VALID ID.

#### How Do I Make a Correction?

- Complete and sign this application. See pages 4 and 5.
- Submit the appropriate documentation. See pages 2 and 3.
- Submit the appropriate fees. See fee schedule below.

## Where Do I Mail the Application?

#### **Regular Mailing Instructions:**

Please submit your application, supporting documents (if required) and fees to:

DSHS - Vital Statistics Section, P.O. Box 12040, Austin, TX 78711-2040.

### **Expedited Service Mailing Instructions:**

The order must be sent to the Vital Statistics Section via an <u>overnight mail service such as: FedEx, Lone Star, or UPS</u>.

Please submit your application, supporting documents (if required) and fees to:

DSHS-Vital Statistics Section, MC 1966, 1100 W. 49th Street, Austin, TX 78756.

#### Fees: How much must I submit?

	Fee Schedule	Fee (\$)		Qty (#)		Total (\$)
	Filing Fees (Select one):					
0	Correction to Birth Certificate	\$15.00			=	
0	Correction to Birth Certificate by adding/removing/replacing a parent	\$25.00		-	=	
0	New Birth Certificate based on child's sex or parent's race or color	\$25.00			=	
	See "Correcting the Child's Sex or Parent's Race or Color" on Page 3.					-
	All orders are returned free of charge by USPS regular mail. Fo	_	-		-	
	may be EXPEDITED by sending the order through an overnight		-			
	FEDEX, LoneStar, or UPS AND selecting one of the overnight ret	urn ship	ping	met	ho	ds
	below.					
0	Expedite Overnight Mail (for shipping within USA)	\$13.00			=	
	\$8 for Overnight Mail + \$5 for Expedited processing					
0	USPS Express Mail (for shipping overnight to PO Box ONLY)	\$27.95			=	
	\$22.95 for Overnight Mail + \$5 for Expedited processing					
O	Priority Mail (for shipping to Overseas Military Address ONLY)	\$9.95			=	
	\$4.95 for Overnight Mail + \$5 for Expedited processing					
	Birth Certificate(s):					
0	Certified Corrected Birth Certificate (\$22.00 per copy)	\$22.00	X		=	
	Grand Total					

Fees may be combined in one check or money order made payable to DSHS - Vital Statistics

*Visit our website:* <a href="http://www.dshs.texas.gov/vs/default.shtm">http://www.dshs.texas.gov/vs/default.shtm</a> (access additional forms, order certified copies online or visit our frequently asked questions)

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### What type of correction are you requesting?

Box # 1: Document Checklist	
I want to	You will need <u>one</u> of the supporting documents shown in Box # 2 below
☐ Correct a hospital error before 1 <sup>st</sup> birthday (hospital must sign and submit application)	No documentation required.
$\hfill \mbox{Correct an error or omission made by the hospital after child's 1^{st} birthday$	1 or 2
☐ Add or correct child's first or middle name, BEFORE child's 1 <sup>st</sup> birthday  Examples: Cindie to Cindy or "no name" to Kathie	No documentation required
☐ Add or correct child's first or middle name, AFTER child's 1 <sup>st</sup> birthday	1, 2, 3, 4, 5, 6, 7, 8, or 9
☐ Correct spelling of child's last name (all documents must be dated PRIOR to birth of child)  Example: Martines to Martinez	5, 10, 11, 12, 13, or 14
☐ Correct child's date of birth, place of birth, time of birth, or sex	1, 2, or 5
☐ Correct parent's information (parent must be currently listed on the birth certificate)	5, 10, 11, 12, 13, or 14
☐ Correct mother's residence address at the time of the child's birth	1, 2, or 5
☐ Adding a parent AND the parents <b>were married BEFORE</b> the child was born ( <b>Both</b> parents sign Section 6 of this application in the presence of a notary)	12
☐ Change Legal name <i>Example: Martinez to Brown</i>	5
□ Remove information from birth record	5
□ Add/remove/replace a parent	See page 3, "Adding, Removing, or Replacing a Parent's Name"

### Suggested Supporting Documents:

Documents must be original certified copies (no photocopies or notarized copies) on official letterhead or with an original certification or seal unless otherwise specified below. Foreign documents, including notaries, must have an apostille or legalization. All supporting documents must match the requested correction(s) exactly and cannot be altered.

Box # 2: Supporting Documents  1 Hospital or medical record at birth (admission/discharge or worksheet)  2 Letter from Hospital or medical facility explaining correction needed  3 Baptismal certificate - Must be within first 5 years of birth	
<ul> <li>2 Letter from Hospital or medical facility explaining correction needed</li> <li>3 Baptismal certificate - Must be within first 5 years of birth</li> </ul>	
3 Baptismal certificate - Must be within first 5 years of birth	
4 Numident printout from the Social Security Administration (SSA). Issued by the SSA, Office	
Privacy and Disclosure, 617 Altmeyer Bldg., 6401 Security Blvd, Baltimore, MD 21235. Conta	ICT
SSA for fees, order form and more information.	
5 A certified copy of a court order affecting information shown on the birth certificate.	
6 Elementary school record - Must be signed by custodian of school records based on earliest	
attendance.	
7 Federal census record	
8 School census record	
9 Armed forces discharge papers (form DD 214) – Photocopy accepted	
10 Birth certificate(s) of child's parent(s)	
11 Birth certificate of child's older brother or sister	
12 Certified copy of Parent's Marriage license	
13 Parent's Naturalization Certificate (must include name change) Call the Immigration and	
Naturalization Service (ICE) at 800-375-5283 to obtain information on how to secure this	
document.	
14 Photocopy of Parent's domestic passport or Parent's foreign passport with U.S. Visa	

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#### Adding, Removing or Replacing a Parent's Name

A new birth certificate may be filed based on parentage to Add, Remove or Replace a parent on the birth certificate. In addition to this application, one of five types of documentation must be presented as evidence to file the new birth certificate:

- A certified copy of the certificate of marriage of the parents;
- 2. A copy of the Acknowledgment of Paternity (VS-159.1) filed with the Vital Statistics Section;
- 3. A certified copy of the court decree establishing parentage;
- A copy of the Acknowledgment of Paternity Rescission (VS 158) filed with the Vital Statistics Section; or,
- 5. A gestational agreement.

Box # 3: Adding, Removing or Replacing a pa	rent's name
I am/We are	You need to complete this application and
A mother not married during pregnancy and not married now and wants to add a father  Or  A mother married within 300 days prior to the	<ul> <li>(1) Both parents sign Section 6 of this application in the presence of a notary; and,</li> <li>(2) Complete an Acknowledgement of Paternity (Visit the Office of the Attorney General, Paternity</li> </ul>
birth of the child and wants to add a biological parent who is not the spouse	Opportunity Program at https://www.texasattorneygeneral.gov/cs/establishing- paternity)
A mother not married during pregnancy but is now married to the parent	<ul><li>(1) Both parents sign Section 6 of this application in the presence of a notary; and,</li><li>(2) Provide a certified copy of your marriage license</li></ul>
A parent with a court order establishing parentage / removing parent (only corrections ordered in the court order will be completed)	<ul><li>(1) One parent signs Section 6 of this application in the presence of a notary; and,</li><li>(2) Provide a certified copy of the <i>entire</i> court order</li></ul>
Or	(all pages) signed by a judge
Parents with a gestational agreement	
Parents who have signed a State of Texas Acknowledgment of Paternity (VS 159.1)	<ul><li>(1) Both parents sign Section 6 of this application in the presence of a notary; and,</li><li>(2) Provide a copy of the signed Acknowledgement of Paternity (VS-159.1).</li></ul>
A parent who has an Acknowledgement of	(1) <b>One</b> parent signs Section 6 of this application in
Paternity Rescission (VS 158) filed with the Vital	the presence of a notary; and,
Statistics Section and wants to remove their name from the birth certificate*	(2) Provide a copy of the signed Acknowledgement of Paternity Rescission (VS-158).

Certified documents submitted will be retained by VSS and placed in a sealed file. A court order is required to unseal a file. Parents should keep copies of certified documents for their records and future use before sending them to VSS.

\* Once a parent is removed from the birth certificate, they are no longer a qualified applicant to request a certified copy of the child's newly corrected birth certificate.

## Correcting the Child's Sex or the Parent's Race or Color

A new birth certificate may be filed that incorporates the corrected sex of the person named on the birth certificate. It may also be filed on older records to remove the parent(s) "race or color". The filing fee to create a new birth certificate is \$25.00. Complete Section 3 and check the bottom box requesting a new birth certificate be filed. If the bottom box on Section 3 is not checked, the correction will be attached to the original record as an addendum (\$15.00 filing fee required).

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## Texas Department of State Health Services

**IMPORTANT:** Photocopies, alterations, strike-through, or write overs of this completed application will not be accepted. Please use a new application if you make a mistake.

## **Birth Certificate Correction Application**

Type or Print (please use blue or	black ink ONLY)				Request No	
Section 1: What is Your Name	e? (Applicant's I	nformatio	on)			
Name (First, Middle, Last):						
Address (Mailing Address, City,	State, Zip):					
Email Address:			Talanh	# (0	[)	
Email Address:			reiepn (	one # (8a)	m-spm)	
Your relationship to Person nan						epresentative
Legal guardian(s) or Manag						
777777 4 301 1 31 111	AN EIGANT 3 V	ALIDITI	<u> </u>	WOST BE	ATTACHED	
Section 2: Birth Certificate Ir						
Enter information as it appea		t birth ce	rtificat	e.		
Birth Certificate Number, if kno	wn: 142 -	-				
Child's First Name:	Middle Name:			Last Nam	e:	
Date of Birth:					Sex:	
Place of Birth (City or town)		(County)				(State) TEXAS
Full Maiden Name of Parent 1:		Full Maid	on Nam	e of Paren	+ 7.	TEXAS
ruii Maideii Name oi Parent 1.		ruii Maiu	en Nam	ie di Paren	ι Ζ.	
Section 3: What do you want	to correct?					
We cannot accept whiteout, str	ike-through, altera	ations, or w	vrite ov	ers.		
List items to be added,	What is on the bir				should the bir	th certificate
corrected or removed	Nat Charre			say?		
Example: Child's First Name Example: Date of Birth	Not Shown August 2, 2010			Tara	st 12, 2010	
Example. Date of Birtii	August 2, 2010			Augus	50 12, 2010	

Check box (if applicable):  $\square$  We/I am requesting a new birth certificate be filed to incorporate the correction to the child's sex or parent's race or color.

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## Section 4: Add or Replace a Parent

If y	ou want to	add or	replace th	ne name of	a parent,	please fil	l out this	section.
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	Child (Even if it will F	Pemain the Sar	ma) If changir	na child's fir	
	icate correction proce		•	ing crinic s in	st of fillidate
First Name:	Middle Name:	Last Name(s):	2 upply.		Suffix:
Name of Second P	arent				
	irth Record (check <b>one</b> )	·□ Mother □ I	 Father □ Parent		
' '	aiden Name Prior to F		defice braicine	•	
First Name:	Middle Name:	Last Name(s):			Suffix:
	Filadic Name.	. ,			Sumx.
Date of Birth	0.4	Place of Birth			
Month: / Day:	/Year:	State or Foreig	n Country:		
O 11					
Section 5: Would yo	ou like to request a b	rth certificate	?		
Check one:					
☐ No, I would not like	e a certified copy of the	corrected birth	certificate.		
☐ Yes, I would like a	certified copy of the co	rected birth cer	tificate. Numb	er requested:	i
			Short	or Long form	:
D				_	
	and quantity ordered	n the fee box	on Page 1.		
Section 6: Affidavit					
5		_			
void your application. WARNING: The Per	nere appropriate, in the . nalty for knowingly m	aking a false s	statement in thi	is form can b	pe 2-10 years
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