

## OFFICE OF VITAL STATISTICS

JESSE S. COOPER BLDG. 417 FEDERAL STREET DOVER, DE 19901 ☎ (302) 744-4549 CHOPIN BUILDING 258 CHAPMAN RD. NEWARK, DE 19702 ☎ (302) 283-7130 THURMAN ADAMS STATE SERV CTR. 546 S. BEDFORD ST. GEORGETOWN, DE 19947

(302) 856-5495

CREDIT CARD ORDERS VIA GOCERTIFICATES or VITALCHEK

## ADOPTEES APPLICATION FOR A COPY OF THE ORIGINAL BIRTH CERTIFICATE

PLEASE PRINT AND COMPLETE ALL ITEMS	REQUESTED BELOW AS ACCURATELY AS POSSIBLE.
Today's Date (mm/dd/yyyy)	Number of copies requested
First, Middle & Last Name at Birth (If known)	First, Middle & Last Name Given You Upon Adoption
Date of Birth (mm/dd/yyyy)	Place of Birth (Hospital, if known)
Birth Mother's Full Maiden Name (If known)	Birth Father's Full Name (If known)
Full Name of Adopted Mother or Parent A	Full Name of Adopted Father or Parent B
REQUIRED UPON FILING OF APPLICATION	
<ol> <li>PHOTO IDENTIFICATION MUST BE PRESENTED to vital statistics verifying that you are indeed the adoptee who is named above.</li> </ol>	
<ol> <li>Cost: \$25.00 per copy (If record is not located, fee will be retained for search). Make checks or money orders payable to the State of Delaware.</li> </ol>	
PLEASE COMPLETE YOUR NAME AND MAILING ADDRESS	
Name	
Street/Development/Rural Delivery/Box Number	
City/Town	
State / Zip Code Email Address	Daytime Telephone Number

## \*\*\*PLEASE BE AWARE THAT THIS PROCESS CAN TAKE UP TO THREE MONTHS\*\*\*

## FOR OFFICE OF VITAL STATISTICS USE ONLY

Identification: