



Tennessee Department of Health Mother's Worksheet for Child's Birth Certificate

Mother's Medical Record No. _____
Mother's Name _____
Facility Name _____

The information provided below will be used to create the child's birth certificate. The birth certificate is a document that will be used for legal purposes to prove the child's age, citizenship, and parentage. This document will be used by the child throughout his/her life. State laws provide protection against the release of identifying medical and health information from the birth certificates to ensure the confidentiality of the parents and their child.

It is very important to provide complete and accurate information to all of the questions. In addition to information used for legal purposes, other information from the birth certificate is used by health and medical researchers to study and improve the health of mothers and newborn infants. Items such as marital status, education, race, smoking, income, and Social Security numbers will be used only for statistics and research studies and will not appear on copies of the issued birth certificate.

PLEASE PRINT CLEARLY

Mother's Information

1. What will be the baby's legal name as it should appear on the birth certificate?

_____ _____ _____ _____
First Middle Last Suffix (Jr., III, etc.)

2. What is the Mother's current legal name?

_____ _____ _____ _____
First Middle Last Suffix (Jr., III, etc.)

3. What is the Mother's date of birth? (Example: March 4, 1977 is 03 - 04 -1977)

_____ _____ _____
Month Day Year

4. In what State, U.S. territory, or foreign country was the Mother born? Please specify one of the following:

State _____ or U.S. territory (such as Puerto Rico, U.S. Virgin Islands, Guam, American Samoa or Northern Marianas) _____
or Foreign country _____

5. Has the Mother ever been married? Yes Go to question 6. No Go to question 7.

6. What is the Mother's original surname?

_____ _____ _____ _____
First Middle Last Suffix (Jr., III, etc.)

7. Where does the Mother usually live? This should be where her household/residence is located.

Complete number and street: _____ Apartment No.: _____
(Do not enter P. O. Box)

City, Town, or Location: _____ County: _____

State or Country: _____ Zip Code: _____
(or Canadian Province)

8. Is this household inside city limits? Yes No Don't know

9. What is the Mother's mailing address?

Same as residence. If the mailing address is the same as where the Mother lives, go to Question 10.

P. O. Box: _____ Complete number and street: _____ Apartment No.: _____

City, Town, or Location: _____

State or Country: _____ Zip Code: _____

Please note the following instructions:

* Presumed legal father of the child: If the mother is now married, or was married at the time of conception, or was married anytime between conception and birth, or is now separated, or is in the process of getting a divorce, or has been divorced less than 300 days, the mother's husband is the presumed legal father of the child. His name and personal information must be entered on the birth certificate.

** Acknowledgment of Paternity: If the mother is not married now, and was not married at the time of conception or anytime between conception and birth, the father's information can be entered on the birth certificate only if the mother and the biological father acknowledge paternity. Acknowledging paternity will legally establish the man completing the form as the child's father. Both the mother and the biological father must mutually agree, complete and sign the Voluntary Acknowledgment of Paternity form (PH-2595) before a notary public. If the mother or the father of the baby is less than 18 years old, then the mother or the father are a minor. Minors must have consent of a parent or legal guardian. The minor's parent or legal guardian must show consent by signing the form.

Father's Information

19a. What is the current legal name of the mother's husband (Presumed Father)?

First Middle Last Suffix (Jr., III, etc.)

19b. What is the current legal name of the baby's Biological Father?

First Middle Last Suffix (Jr., III, etc.)

20. What is the Father's date of birth? (Example: March 4, 1976 is 03 - 04 - 1976)

Month Day Year

21. In what State, U.S. territory, or foreign country was the Father born? Please specify one of the following:

State _____ or U.S. territory (such as Puerto Rico, U.S. Virgin Islands, Guam, American Samoa or Northern Marianas) _____

or Foreign country _____

22. What is the highest level of schooling that the Father has completed? Check the box that best describes his education. If he is currently enrolled, check the box that indicates the previous grade or highest degree received.

- | | |
|--|--|
| <input type="checkbox"/> 8th grade or less | <input type="checkbox"/> Associate degree (such as AA, AS) |
| <input type="checkbox"/> 9th - 12th grade, no diploma | <input type="checkbox"/> Bachelor's degree (such as BA, AB, BS) |
| <input type="checkbox"/> High school graduate or GED completed | <input type="checkbox"/> Master's degree (such as MA, MS, MEng, MEd, MSW, MBA) |
| <input type="checkbox"/> Some college credit, but no degree | <input type="checkbox"/> Doctorate (such as PhD, EdD) or Professional degree (such as MD, DDS, DVM, LLB, JD) |

23. Is the Father Spanish/Hispanic/Latino? If not Spanish/Hispanic/Latino, check the "No" box. If Spanish/Hispanic/Latino, check the appropriate box.

- | | |
|--|---|
| <input type="checkbox"/> No, not Spanish/Hispanic/Latino | <input type="checkbox"/> Yes, other Spanish/Hispanic/Latino (such as Spaniard, Salvadoran, Dominican, Colombian), Specify _____ |
| <input type="checkbox"/> Yes, Mexican, Mexican American, Chicano | |
| <input type="checkbox"/> Yes, Puerto Rican | |
| <input type="checkbox"/> Yes, Cuban | |

24. What is the Father's race? Please check one or more races to indicate what he considers himself to be.

- | | |
|--|--|
| <input type="checkbox"/> White | <input type="checkbox"/> Korean |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Vietnamese |
| <input type="checkbox"/> American Indian or Alaska Native, name of enrolled or principal tribe _____ | <input type="checkbox"/> Other Asian, Specify _____ |
| <input type="checkbox"/> Asian Indian | <input type="checkbox"/> Native Hawaiian |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Guamanian or Chamorro |
| <input type="checkbox"/> Filipino | <input type="checkbox"/> Samoan |
| <input type="checkbox"/> Japanese | <input type="checkbox"/> Other Pacific Islander, Specify _____ |
| | <input type="checkbox"/> Other, Specify _____ |

25. What does the Father consider his primary race to be? Please check one.

- | | | |
|--|-----------------------------------|--|
| <input type="checkbox"/> White | <input type="checkbox"/> Chinese | <input type="checkbox"/> Filipino |
| <input type="checkbox"/> Black or African American | <input type="checkbox"/> Japanese | <input type="checkbox"/> Other Asian or Pacific Islander |
| <input type="checkbox"/> American Indian or Eskimo | <input type="checkbox"/> Hawaiian | <input type="checkbox"/> Other Race not mentioned above, Specify _____ |