

Washington State Birth Filing Form

Fields with asterisk (*) are required and appear on the Birth Certificate For Hospital Use Only Child's Medical Record #: Mother/Parent's Medical Record #: Prefer Parent / Parent Labels on Birth Certificate ☐ No ☐ Yes (Default Labels are Mother / Father) Plurality: ☐ 1- single birth 2- twin 3- triplet Other _ If multiple, this worksheet is for child: ☐ 1- first born 2- second born 3- third born ☐ Other Child's Information *1. Child's Name *2. Child's Date of Birth (MM/DD/YYYY) *3. Time of Birth *4. Child's Sex ☐ Male ☐ Female 5. Type of Birthplace 6. Planned Birth Place, if different (specify): ☐ Hospital ☐ Home ☐ Enroute ☐ Clinic/Doctor's Office ☐ Freestanding Birth Center ☐ Other (specify): *7. Name of Facility (If not a facility, enter name of place and address) *8. County of Birth *9. City of Birth Mother/Parent's information 10. Mother/Parent's Current Legal Name *11. Full name as it appears on your Birth Certificate Last *12. Date of Birth (MM/DD/YYYY) *13. Birthplace (State, Territory, or Foreign Country) 14. Social Security Number 15. Do you want to get a Social Security Number for your child? ☐ No 16a. Residence: Number and Street (e.g., 624 SE 5th St.) Apt No. 16b. If not U.S.; Country 16d. County 16e. If you live on Tribal Reservation, give name 16f. City or Town 16g. Zip Code + 4 16h. Inside City Limits? 17. How Long at Current Residence? 18. Telephone Number ☐ Yes ☐ No ☐ Unknown Years: Months: 19a. Mailing Address, if different: Number and Street, or PO Box Apt. No. 19b. If not U.S.; Country 19c. State 19d. City 19e. Zip Code + 4 21. Kind of Business/Industry (do not use company name) 20. Occupation (type of work done during last year) 23. Mother/Parent Hispanic Origin? 24. Mother/Parent Race (check one or more) 22. Mother/Parent Education Level (Check the box that best describes the highest degree (Check the box that best describes whether the mother is Spanish/Hispanic/Latina or check "No" box if not or level of school completed at the time of delivery.) 2 Black or African American Spanish/Hispanic/Latina.) 3 American Indian or Alaska Native 1 8th grade or less (specify):_ 1 No, not Spanish/Hispanic/Latina Name of enrolled or principal tribe) 2 ☐ 9th − 12th grade; no diploma 2 Yes, Mexican, Mexican American, 3 High school graduate or GED 4 Asian Indian 5 Chinese Chicana 4 Some college credit, but no degree 7 Dapanese 6 | Filipino Yes, Puerto Rican Associate degree (AA, AS, etc.) 8 ☐ Korean 9 Uietnamese Yes, Cuban 6 Bachelor's degree (BA, AB, BS, etc.) 10 Other Asian (specify): 5 Yes, Other Spanish/Hispanic/Latina 7 Master's degree (MA, MS, MEd, MSW, MBA, etc.) 11 Native Hawaiian 12 Guamanian or Chamorro (specify): 8 Doctorate (PhD, EdD, etc.) or professional 13 🗌 Samoan degree (MD, DDS, DVM, LLB, JD, etc.) 14 Other Pacific Islander (specify):
15 Other (specify):

Continue on next page

_	25. Current Height 26. Pre-Pregnancy Weight (po									
Mother/Parent Information	Feet: Inches:				☐ Yes ☐ No					
orm	28. Cigarette Smoking Before and During Pregnancy Avera		Average numbe	er of cigarettes or pa						
<u>u</u>	☐ Yes ☐ No			#	of cigarette		# of packs			
rent			Three months before pregnancy				or			
/Pa			First three months of pregna Second three months of preg				or			
ther				ionths of pregnancy ths of pregnancy	/		or			
Mo			asi ililee ilion	ins of pregnancy			or			
		Mari	tal Status of	Mother/Parent						
	29. Is Mother/Parent married? (Check only one		iai Otatao oi	mounding around						
	Important - Read before responding to marital status question:									
	If you were married at any time during your pregnancy, your spouse or partner is considered the other legal parent unless they complete a denial of parentage								€	
	and another person acknowledges that they are the father/parent (chapter 26.26A RCW). To add someone other than your spouse or partner to the birth									
	certificate, an Acknowledgment of Parentage form (DOH 422-159) and Denial of Parentage form (DOH 422-158) needs to be completed by all parties. Under									
	Washington State law, a state-registered domestic partnership is considered the same as a marriage (chapter 26.60 RCW).									
	If you were not married at any time during the pregnancy, complete an Acknowledgment of Parentage form to add the father/parent to the birth certificate.									
Status	Married - Yes	Married - No								
	29a. Yes, I am married to the other person identified in box #30.			29d. No, I am not married. I am providing information about the						
rital	·			father/parent in box #30. I will complete an Acknowledgement of						
Ma				Parentage t	form at	the hospita	ıl.			
Mother's Marital Status				And the constitute of the constitution of the						
	29b. Yes, I am married but not to the other pe	Ask hospital staff for an Acknowledgment of Parentage form (DOH 422-159). 29e. No, I am not married now, but I was married to the other person								
	200. — 100, I am marined but not to the other person identified in box #30.			identified in box #30 at some time during this pregnancy.						
	Ask hospital staff for an Acknowledgment of Pare				Ü	, ,				
	159). You must complete this form, including the spouse's Denial of Parentage									
	form (DOH 422-158).									
	29c. Yes, I am married but not providing the spouse or partner's information.			29f. No, I am not married and not submitting a completed Acknowledgment of Parentage form with the father/parent's						
	mormation.			information.						
	If this box is checked, the other parent will be list "None Named".	ertificate as	If this box is checked, the other parent will be listed on the birth certificate as "None Named".							
Father/ Parent's Information										
	*30. Father/Parent's Current Legal Name									
	*31. Date of Birth (MM/DD/YYYY)	Middle	loop (Ctata Taux	tory, or Foreign Country		Last	I Security N	umho-		
	31. Date of Birtir (MINI/DD/YYYY)	SZ. Birtiip	lace (State, Ferri	tory, or Foreign Country	')	33. 30Cla	i Security N	umber		
	1 1									
_	34. Occupation (type of work done during last year.)			35. Kind of Busi	iness/Ir	ndustry (do	not use Company	/ Name)		
Information										
n.c	36. Father/Parent Education Level		rent of Hispa		38. F	ather/Pare	ent Race (chec	ck one or more)		
	(Check the box that best describes the highest degree or level of school completed at the time of delivery.)		that best describes	s whether the Latino or check "No" box	x 4 F	White				
nt's	iever er eeneer eempretee at the time er denvery,	if not Spanish/H			2 [_	African Ame	rican		
Pare	1 8th grade or less (specify):	4 D No not Cooniet // Personate // et				=	n Indian or A			
Father/Parent's	2 ☐ 9 th – 12 th grade; no diploma 3 ☐ High school graduate or GED	1 ☐ No, not Spanish/Hispanic/Latino 2 ☐ Yes, Mexican, Mexican American, Chicano			(Name of enrolled or principal tribe)					
Fat	4 Some college credit, but no degree				4 Asian Indian 5 Chinese					
	5 Associate degree (AA, AS, etc.)	3 Yes, Pu			6 [=		☐ Japanese		
	6 Bachelor's degree (BA, AB, BS, etc.)		4 🔲 Yes, Cuban			Korean		☐ Vietnamese		
	7 Master's degree (MA, MS, MEd, MSW, MBA,		her Spanish/Hi	spanic/Latino	10 [sian (specify):			
	etc.) 8 Doctorate (PhD, EdD, etc.) or professional	(specify):			11 [☑ Guamanian or Chamor	ro	
	degree (MD, DDS, DVM, LLB, JD, etc.)				13 [Samoar	1			
	adgree (MD, DDG, DVM, ELD, 3D, etc.)					14 Other Pacific Islander (specify):				
					15 [Other (s	pecify):			