ARIZONA DEPARTMENT OF HEALTH SERVICES

Bureau of Vital Records

Affidavit to Correct or Amend a Birth Certificate

INSTRUCTIONS

1. The following fields must always be completed on the affidavit: registrant's name (first, middle, last, and suffix), mother's /parent's maiden name prior to first marriage (first, middle, last, and suffix), and registrant's date of birth.
2. Please type or print using black or blue ink only. Separate the first, middle, last names, and suffix by using commas.
3. **Do not** make any alterations after the information has been entered on the affidavit. **ALTERATIONS SHALL INVALIDATE THIS AFFIDAVIT** and you will be required to complete a new affidavit.
4. Other changes Fields - these fields may be used to specify other requested changes on the birth record such as mother's/ parent's date of birth and place of birth, etc. Please specify the field name you want to amend in the data field column on the affidavit.
5. The affidavit must be signed in the presence of a notary.
6. A court order submitted with the affidavit **must be certified** by the court where the order was finalized.

Note: This form is only to correct or amend a birth certificate, it is not to be completed for adoptions or adding paternity per an Acknowledgment of Paternity.

ITEM TO BE CHANGED	AGE	DOCUMENTATION REQUIRED
Not named registrant's first name, middle name, or suffix	90 days or less	Application and Affidavit to Correct or Amend a Birth Certificate.
Not named registrant's first name, middle name, or suffix	More than 90 days but less than 7 years	Application, Evidentiary document created within one year after birth, and Affidavit to Correct or Amend a Birth Certificate.
Not named registrant's first name, middle name, or suffix	More than seven years	Application, Court Order, and Affidavit to Correct or Amend a Birth Certificate.
Named registrant's first name, middle name, last name, or suffix	90 days or less	Application and Affidavit to Correct or Amend a Birth Certificate.
Named registrant's first name, middle name, last name, or suffix	More than 90 days but less than one year	Application, Evidentiary document created within one year after birth, and Affidavit to Correct or Amend a Birth Certificate.
Named registrant's first name, middle name, last name, or suffix	More than one year	Application, Certified copy of a court order for legal name change, and Affidavit to Correct or Amend a Birth Certificate.
Registrant's month or day of birth	All ages	Application, Evidentiary document that include month or day, and Affidavit to Correct or Amend a Birth Certificate.
Registrant's parent's date of birth or place of birth	All ages	Application, Evidentiary document (certified copy of parent's birth certificate or individual's parent's passport), and Affidavit to Correct or Amend a Birth Certificate.

The above chart lists some of the most requested items to change on a birth certificate. Please visit the Bureau of Vital Records website for further information including fees necessary to request to correct or amend a birth certificate: https://www.azdhs.gov/policy-intergovernmental-affairs/vital-records/index.php#fees-home.

ARIZONA DEPARTMENT OF HEALTH SERVICES

RESET PRINT EMAIL SAVE AS

Date Stamp

Bureau of Vital Records

Affidavit to Correct or Amend a Birth Certificate

Please use black or blue ink only.

ANY ALTERATIONS SHALL INVALIDATE THIS AFFIDAVIT

*Asterisks indicate required field.

DATA	AS THE BIRTH RECORD READS NOW	CORRECTION/AMENDMENT DESIRED
*Registrant's Name (First, Middle, Last, Suffix)	, ,	, ,
*Registrant's Date of Birth (MM/DD/YYYY)	/ /	/ /
*Mother's/Parent's Name Prior to First Marriage (First, Middle, Last)	, ,	, ,
Father's/Parent's Name (First, Middle, Last, Suffix)	, ,	, ,
Other Changes (List Field Name)		
Other Changes (List Field Name)		
Other Changes (List Field Name)		
Other Changes (List Field Name)		
Other Changes (List Field Name)		
Other Changes (List Field Name)		

I attest the corrections/amendments requested above are accurate, true and valid to the best of my knowledge

Notary Public:

☐ **Registrant's Signature** _____ ☐ **Mother's/Parent's Signature** _____

Check One - the registrant must be at least 18 years of age or show proof of emancipation with a certified court order or certified marriage certificate)

State of _____ County of _____, _____ day of _____, 20____ , before me personally appeared _____ (name of signer), whose identity was proven to me on the basis of satisfactory evidence to be the person whose name is subscribed to this document, and who acknowledged that he/she signed the above/attached document.

Notary Signature: _____

Expiration Date of Commission: _____

Notary Stamp/Seal

☐ **Father's/Parent's Signature** ☐ **Custodian or Guardian's Signature** _____

Check One - the custodian or guardian must present a valid, certified custody or guardianship court order.)

State of _____ County of _____, _____ day of _____, 20____ , before me personally appeared _____ (name of signer), whose identity was proven to me on the basis of satisfactory evidence to be the person whose name is subscribed to this document, and who acknowledged that he/she signed the above/attached document.

Notary Signature: _____

Expiration Date of Commission: _____

Notary Stamp/Seal

FOR OFFICE USE ONLY		SFN:
Affidavit Processed By:	Office Location:	Date Processed: