

COMMONWEALTH OF KENTUCKY STATE REGISTRAR OF VITAL STATISTICS



****DCBS ELECTRONIC REQUEST****

CERTIFICATE OF LIVE BIRTH

Please Print or Type Sections 1 through 21.

BIRTH CERTIFICATE INFORMATION									
1. Full Legal Name of Registra	ant :	t: First		Middle		Last			
2. If child has been adopted, please provide original birth name, if known:		First		Middle		Last			
3. Date of Birth:	Mont	h	Day		Year		Sex	Age Last Birthday (<21)	
4. Place of Birth:	Kentucky City or Town		K	Kentucky County			Name of Hospital		
5. Mother's Maiden Name:	First			Middle			Last		
6. Father's Name:	First			Middle			Last		

DCBS-PCC CASE WORKER OR CHILD'S INFORMATION							
7. Full Name:	8. Primary Phone No:		9. Phone Ext:				
10. DCBS-PCC Representative's Title:	11. Email Address						
12. Requestor's Signature:	13. Date:						
14. Check Box To Acknowledge Electronic Signature:							
15. DCBS CASE NUMBER:							
16. Birth Certificate to be: MAILED or PICKED-UP							

17. Address: 19. County:	20. State:	18. City:	
19. County:	20. State:		
			21. Zip:
Volume 213.141 (child who	3.141 Fee for Certified Copies (4)(c) <u>No fee</u> or compensation shall be all b is in the custody of or committed to the ent to the cabinet in accordance with KR Certified Copies @ <u>\$0.00</u> each any	e cabinet, incluc RS 610.110(6). = \$	ding a child who has extended

Please complete this form using Adobe Acrobat Reader and click the "Email Completed Form" button to submit.

KRS 610.110(6) Disposition of case:

KRS 610.110(6) Disposition of case. Upon motion of the child and agreement of the Department of Juvenile Justice or the cabinet, as appropriate, the court may authorize an extension of commitment **up to age twenty-one (21)** for the purpose of permitting the Department of Juvenile Justice or the cabinet, as appropriate, to assist the child in establishing independent living arrangements if a return to the child's home is not in his or her best interest.

INSTRUCTIONS FOR THE VS-37-DCBS-YOUTH FILLABLE (BIRTH CERTIFICATES) REQUEST FORM. TO BE USED SPECIFICALLY AND ONLY FOR CHILDREN IN STATE CUSTODY. NOTE: TYPE IN YOUR SIGNATURE.

The **VS-37-DCBS-YOUTH** fillable form was created by the Office of Vital Statistics (OVS) for use by children (under the age of 21) who are in the custody of or committed to the Cabinet of Health and Family Services (CHFS); including children who have extended commitment to the Cabinet in accordance with KRS 610.110.

Kentucky Revised Statutes mandating requirements for fee exempt birth certificates are:

213.141 Fee for certified copies of certificates or records or for a search of records -- Exemptions. (4) (C) No fee or compensation shall be allowed or paid for furnishing a certificate of birth to a child who is in the custody of or committed to the cabinet, including a child who has extended commitment to the cabinet in accordance with KRS 610.110(6).

610.110 Disposition of case. (6)Upon motion of the child and agreement of the Department of Juvenile Justice or the cabinet, as appropriate, the court may authorize an extension of commitment up to age twenty-one (21) for the purpose of permitting the Department of Juvenile Justice or the cabinet, as appropriate, to assist the child in establishing independent living arrangements if a return to the child's home is not in his or her best interest.

The VS-37-DCBS-YOUTH is a fillable form ONLY FOR ORDERING FEE EXEMPT BIRTH CERTIFICATES to be emailed to Chafee (Chafee.ilp@ky.gov). Chafee will review and forward to OVS.

- 1. Complete each field within the form. If mistakes are made and you need to start over, click the <RESET> button located at the top right of the form. To correct an item, hover over that field, select that item, and retype the correct information.
- 2. The form consists of 21 fields.
- 3. Required fields are highlighted in red. These fields are required for **OVS** to conduct a search for birth certificates.
- 4. Start by clicking in the 'First' name field of the Full Legal Name of Registrant (the registrant is the child).
- 5. Complete the fields within the sections. When you type your name in field 12, your name will appear in a cursive font. Your name in field 12 represents an electronic signature.
- 6. Click the "Check Box to Acknowledge Electronic Signature". When you click the box, the "Date" in field 13 will populate with the current date.
- 7. After reviewing the form to ensure all information is correct, electronically send the form by clicking on the orange "Email Completed Form" button.
- 8. An email box will appear on your screen with the email address pre-populated "DO NOT CHANGE THE EMAIL ADDRESS." Within the email application, click the "Send" button to send the email (Chafee.ilp@ky.gov)
- 9. **Chafee** will receive your email along with your request attached. If all required fields are completed and you have electronically signed the form, the request will be submitted to **OVS**.
- 10. Chafee will submit the request to OVS by selecting the blue "Email Completed Form" button.
- 11. **OVS** will receive the email from **Chafee** and review the request. If all required fields are completed and the requestor has electronically signed the form, the requested certificates will be mailed to the address provided on the form; or, the certificates will be held at the front desk for pick up.
- 12. If there are required fields left blank, or if there is no electronic signature, OVS will reject the form back to **Chafee**. After corrections are made, repeat steps 7, 8, 9 and 10.

Please call OVS at 502-564-4212 if you have questions.