

Birth Certificate Application

Complete this form to order a certified copy of a Minnesota birth certificate.

You must fill in the information we ask for on this form. We need the information to find the correct birth record and to make sure that you may receive the certificate. If we cannot find the birth record you asked for, we will send you a certified "Statement of No Birth Record Found". *Minnesota Rules, part 4601.2600*

Information to find the requested birth record Minnesota Rules, part 4601.2600, subpart 2										
bject	Child/subject first name	Child/subject middle name				Child,	/subject last nar	Name suffix		
Child/Subject	Date of birth (MM/DD/YYYY)		male ale	Minnesota city of birth			Minnesota county of birth		State of birth MN	
nts	Parent one first name	Parent o	ne mido	dle name	Parent one las	arent one last name		Last name before 1 st marriage		Name suffix
Parents	Parent two first name Parent two			vo middle name Parent tw		ast name		Last name before 1st marriage		Name suffix
Requester - person completing this application Minnesota Rules, part 4601.2600, subpart 3										
	Requester full name					Date of	Date of birth (MM/DD/YYYY) Daytime phone (10-digit)			
Requester	Requester mailing address – street					Apt/Un	it#	Email		
Re						City			State	ZIP Code
MANDATORY — Check the boxes below that describe your relationship to the subject of the record:										
Marital status is important. Records of children born to married parents are "public". That means that the certificate is available to those listed in items 1 – 18 below. Records of children born to single mothers are "confidential" unless the mother chose to make the record public at the time of birth. Only the persons listed below in items 19 – 23 may obtain confidential birth certificates. Minnesota Statutes, section 144.225, subdivisions 2 and 7.										
"Public" birth records are available to individuals who meet any of the legal requirements in items 1-18										
1. □ A parent named on the subject's record 4. □ A child of the subject 5. □ A grandchild of the subject 6. □ A great-grandchild of the subject 7. □ Spouse of the subject (You must be the current spouse) 9. □ The legal custodian, guardian, or conservator of the subject (we need a certified copy of the court order that names you) 10. □ The health care agent for the subject (we need a valid "health care power of attorney" document) 11. □ Subject's personal representative who requires the birth certificate for administration of the subject's estate 12. □ Successor of a deceased subject who requires the birth certificate for administration of the subject's estate 13. □ Person who demonstrates a need for a birth certificate to determine or protect a personal or property right 14. □ Adoption agency — to complete post-adoption search (we need a copy of your Employee ID) 15. □ Local/state/tribal or federal governmental agency (we need a copy of your Employee ID) 16. □ Attorney — I represent the subject, or a person listed in items 1-14 above. If you are a NON-Minnesota attorney, My Minnesota Attorney License Number is:										
19. ☐ Parent named on the subject's record										
 20. The legal custodian, guardian, or conservator of the subject (you need a certified copy of a court order naming you) 21. The subject, when 16 years old or older 22. Representatives of Minnesota programs that administer child support, medical assistance, MinnesotaCare, and services under Minnesota Statutes, sections 124D.23; Minnesota Statutes, chapter 260E; and, tribal child support programs, Minnesota Statutes, section 144.225, subdivision 2, paragraph (f). (we need a copy of your Employee ID) 23. Pursuant to a valid, certified copy of a U.S. court order (not a subpoena) releasing the certificate 										
Requester's signature Form revised 6/2023										