State of California – Health and Human Services Agency

Department of Health Care Services

Request for California Birth Record

Medi-Cal can ask for a birth record for people born in California — *for free!*

Here's how:

- Fill out this form. Type or print neatly. You may use the information from a copy of a birth certificate to complete this form.
- Take or mail your completed form to your local social services office.
- If you have difficulty filling out this form, call your local social services office.

We may not be able to get the birth record you are asking for. If this happens, you must provide other proof of citizenship.

If we get the birth record you are asking for, you must still provide proof of identity.

The county social services office needs the information requested to search for a California birth record to prove citizenship. You do not have to provide this information. But if you do not, the county may not be able to find the birth record.

Today's date:	*Month:*	*Day:*	*Year:*
Name of person filling out this form:	*First:*	*Middle:*	*Last:*
Whose birth record do you want? **Name on birth certificate:**	*First:*	*Middle:*	*Last:*
If this person was **adopted**, write adopted name:	*First:*	*Middle:*	*Last:*
Sex:	☐ Male ☐ Female		
Date of birth:	*Month:*	*Day:*	*Year:*
City and County of birth:	*City:*	*California county:*	
Mother's maiden name:	*First:*	*Middle:*	*Last:*
Father's name:	*First:*	*Middle:*	*Last:*
Birth Certificate # *(if you know it):*			
Name of *next* person whose birth record you want:	*First:*	*Middle:*	*Last*
If this person was **adopted**, write adopted name:	*First:*	*Middle:*	*Last*
Sex:	Male Female		
Date of birth:	*Month:*	*Day:*	*Year:*
City and County of birth:	*City:*	*California county:*	
Mother's maiden name:	*First:*	*Middle:*	*Last:*
Father's name:	*First:*	*Middle:*	*Last:*
Birth Certificate # *(if you know it):*			

If you need more than two birth records, fill out another form.

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