



STATE OF IDAHO PUTATIVE FATHER REGISTRATION NOTICE OF COMMENCEMENT OF PATERNITY PROCEEDINGS IDAHO CODE, SECTION 16-1513

Fathers of children born out-of-wedlock who wish to claim paternity rights must:

1. submit this form to establish paternity with the Idaho Department of Health and Welfare Bureau of Vital Records and Health Statistics, AND
2. begin proceedings to establish paternity

Summary Instructions

1. Read all information in this packet before completing the application.
2. The application information may be filled out online and printed or entered by hand. If entering the information by hand, use blue or black ink and make sure the information is neat and can be read.
3. There is a fee of \$10.00 to process the application.
4. The application must be signed in the presence of a Notary Public.
5. Mail the application to:
IDAHO VITAL RECORDS
PO BOX 83720
BOISE, IDAHO 83720-0036

Legal authority

The Idaho legislature passed a law (Section 16-1513, Idaho Code) to enable fathers of children born out-of-wedlock to declare their paternal rights and intent to support the child to the best of their ability.

Is there a fee?

A filing fee of \$10.00 is required and must be submitted with the application.

Who is eligible to register?

If you believe you may be the natural (biological) father of a child, you are eligible to register. If such fathers do not register, and the child is adopted, all paternal rights will be forfeited.

How does the Registry work?

Registration should be done before the birth of a child or at least before the date of any proceeding wherein the child is placed with an agency licensed to provide adoption services or foster care. If a child is in foster care or there are adoption proceedings, an entitled party may request a search to see if anyone has registered a claim of paternity for that child. The information provided on the registry form may be released to the entitled party.

Will the natural father's name be added to the child's birth certificate if he registers on the Putative Father Registry?

No. If the natural (biological) father of a child wishes to register a claim of paternity, then he may request to have his name placed on the Putative Father Registry. The registry DOES NOT establish paternity or place the putative father's name on the birth certificate. To learn more about establishing paternity, please visit our website healthandwelfare.idaho.gov/vitalrecords.

Is all the information on the form required?

Yes. The form must be complete and signed in front of a Notary Public before our office can register the putative father. The information provided on the registry form may be released to an entitled party requesting a search to see if anyone has registered a claim of paternity.

Who do I contact if I have more questions?

- healthandwelfare.idaho.gov/vitalrecords for forms and general ordering information
- ivrla@dhw.idaho.gov to email questions to the Bureau of Vital Records and Health Statistics
- 208-334-5980 once in the phone menu, select option 4
- Mail the application to:
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FOR OFFICE USE ONLY	
Registration Number:	

PUTATIVE FATHER INFORMATION

FIRST NAME:	MIDDLE NAME:	LAST NAME:
DATE OF BIRTH:	STATE OF BIRTH:	SOCIAL SECURITY NUMBER:
MAILING ADDRESS - STREET AND NUMBER OR PO BOX:		
MAILING ADDRESS - CITY	MAILING ADDRESS - STATE:	MAILING ADDRESS - ZIP CODE:
DAYTIME CONTACT PHONE NUMBER:	EMAIL ADDRESS:	
Is the putative father a minor? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, please provide parents mailing address and daytime contact phone number:		
MAILING ADDRESS - STREET AND NUMBER OR PO BOX:		MAILING ADDRESS - CITY:
MAILING ADDRESS - STATE:	MAILING ADDRESS - ZIP CODE:	DAYTIME CONTACT PHONE NUMBER:
Please list any other name(s) used by the putative father:		
FIRST NAME:	MIDDLE NAME:	LAST NAME:
FIRST NAME:	MIDDLE NAME:	LAST NAME:
FIRST NAME:	MIDDLE NAME:	LAST NAME:

CHILD'S BIRTH INFORMATION

DUE DATE/DATE OF BIRTH:	STATE, CITY, COUNTY, OR LOCATION OF BIRTH:		
MOTHER'S NAME:			
CURRENT FIRST NAME:	CURRENT MIDDLE NAME:	CURRENT LAST NAME:	LAST NAME BEFORE FIRST MARRIAGE:
Please list any other name(s) used by the natural mother:			
FIRST NAME:	MIDDLE NAME:	LAST NAME:	
FIRST NAME:	MIDDLE NAME:	LAST NAME:	
FIRST NAME:	MIDDLE NAME:	LAST NAME:	
Last known mailing address of the natural mother:			
MAILING ADDRESS - STREET AND NUMBER OR PO BOX:			
MAILING ADDRESS - CITY:	MAILING ADDRESS - STATE:	MAILING ADDRESS - ZIP CODE:	



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STATEMENTS - read each item

Item 1.	I have or will be performing at least one of the following actions: a. file a voluntary acknowledgment of paternity affidavit with Idaho Vital Records b. commencing proceedings to establish paternity with a court of competent jurisdiction
Item 2.	I acknowledge my right to file a claim of parental rights under the Abandoned Child Registry. Forms and information to register for this separate registry maintained by Idaho Vital Records are available at healthandwelfare.idaho.gov/vitalrecords
Item 3.	I acknowledge any Abandoned Child Registry or Putative Father Registry submitted <i>MUST</i> be filed before an order terminating parental rights is entered by the court. If I do <i>NOT</i> file a claim before parental rights are terminated, it could be assumed the child is abandoned and I have waived any right in relation to the child or notification of court proceedings about termination of parental rights or adoption of the child. See Idaho Code 16-1513 (d)
Item 4.	I acknowledge that my right to file a claim of parental rights under the Putative Father Registry shall not satisfy the requirements of the Abandoned Child Registry.
Item 5.	A person who knowingly or intentionally falsely files or registers as a putative father is guilty of a misdemeanor.
Item 6.	I hereby register my notice of commencement of proceedings to establish my paternity of the above described child. These rights include my willingness and intent to support, and to establish a relationship with this child to the best of my ability. <i>I understand this will not alter or add my name to the birth certificate.</i> A check or money order payable to Vital Records for the current fee must accompany this notice. This fee covers only the cost of this registration procedure.

NOTARIZATION

I declare that I am the natural (biological) father of the child whose information is listed on page 1 of this form and acknowledge I have read the above statements.

PUTATIVE FATHER PRINTED NAME:

PUTATIVE FATHER SIGNATURE:

Subscribed and sworn before me this _____ day of _____, 20____

STATE OF:		(seal)
COUNTY OF:		
Notary Public Signature:		
My Commission expires:		
Residing at:		