Joe Lombardo Governor Richard Whitley, MS Director







Cody Phinney, MPH Administrator

Ihsan Azzam, Ph.D., M.D. Chief Medical Officer

REPORT OF ADOPTION						
PART 1 - ADOPTEE'S INFORMATION The information in this section must be given as it was <i>before</i> the adoption, if known. Without this information it may be impossible to locate and amend the adoptee's birth record.						
Adoptee	Adoptee's First Name	Adoptee's Middle Name	Adoptee's Middle Name		Adoptee's Last Name	
	Adoptee's Date of Birth	Adoptee's Place of Birth (City	y or Hospital)	Adoptee's State of Birth Adoptee's Sex		
n' d n	Birth Parent 1's First Name	Birth Parent 1's Middle Name	-	Birth Parent 1- Last Name Prior to 1st Marriage		
Birth Parents	Birth Parent 2's First Name	Birth Parent 2's Middle Name	е	Birth Parent 2 - Last Name Prior to 1st Marriage		
PART 2 - ADOPTIVE PARENTS' INFORMATION Adopting parents must furnish the following information on themselves. The information will be used to prepare a new birth certificate. DO NOT USE INITIALS.						
LISTED AS ☐ MOTHER OR ☐ PARENT (1) INFORMATION Check the Appropriate Box: ☐ Adoptive Parent or ☐ Biological Parent						
First Name	Middle Name	Last Name	Biological Parent	Last Name - Prior to First Marriage		
Date of Birth	Place of Birth (State or Country)	Current Occupation (type of we	ork - not employer)	Social Security Number		
Residence at the	Street Address				City or Town	
Time of Adoptee's Birth	State	County			side City Limits? Yes or □ No	
Current Mailing Address (Street, City, State & ZIP) Telephone Number						
LISTED AS FATHER OR PARENT (2) INFORMATION						
First Name	Middle Name	iate Box: □ Adoptive Parent or □ Biological Parent Last Name		Last Name - Prior to First Marriage		
Date of Birth	Place of Birth (State or Country)	Current Occupation (type of work - not employer) Social Security Number				
SIGNATURE OF PARENT VERIFYING INFORMATION IN PART 2 IS CORRECT						
First Name (print) Last Name (print) Signature of Parent Verifying Information						
ATTORNEY OF RECORD INFORMATION						
First Name Last Name Phone Number Mailing Address (Street, City, State & ZIP)						
PART 3 – COURT CLERK'S CERTIFICATION (REQUIRED): The clerk of the court requires all available information in Parts 1 and 2 above, before completing and certifying Part 3.						
I hereby certify that the child identified above was adopted by the above-named parent(s) on the day of ,20						
and is now to bear the name of (First, Middle & Last - Do Not Use Initials) First Middle Last						
as set forth in the decree of adoption made on that day in case number in County in the State of						
Signature and Seal of County Clerk						
PART 4 – MAILING COMPLETED NEW BIRTH CERTIFICATES: Email Address						
When completed, the new birth certificate will be mailed to the following person and address.						
Addressee's First Nam	e	Addressee's Last Name		Telephone Number		
Addressee's Mailing A	ddress or P.O. Box	City	State	ZIP		

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DEPARTMENT OF HEALTH AND HUMAN SERVICES





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Instructions

Please submit all necessary documentation as detailed below with payment to process your adoption request.

Part 1: Adoptee's Information

The information in this section must be given as it was at the time of birth (before the adoption) to locate the birth record.

- Name of Adoptee at the time of birth No Initials
- Adoptee's Birth Information
- Birth Parents' Information No Initials

Part 2: Adopting Parents' Information

Please enter the adoptive parents' information.

- Do not use initials as this will cause your paperwork to be returned.
- Enter the last name prior to first marriage. Please do not leave it blank.
- In the Occupation field, enter the type of work not the employer of the adoptive parents. Without the adoptive parents' occupational data, the birth parents' occupations will remain on the birth record.
- Enter current complete mailing address including city, state and ZIP code.
- Enter Parent's full address at the time of the Adoptee's birth. (This address will appear on the new birth certificate.)
- Signature of parent verifying the information in Part 2 is correct.
- Attorney of Record's information. This is the person that is assisting with the adoption.

Part 3: Court Clerk's Authorization

The court clerk will complete and certify Part 3.

Part 4: Address to Return Completed Certificate (Required)

The new birth certificate will be mailed to the current address listed in Part 2 unless a different address is requested in Part 4. Please allow four to six weeks to process your request.

Required Documentation (Must be included with the Report of Adoption):

- For adoptees born in Nevada and adopted in Nevada or in another state, submit each of the following:
 - Report of Adoption and certificate by the court clerk (will NOT be returned)
 - Certified U.S. District Court Order Decree of Adoption (will NOT be returned)
 - Proper Filing Fee (see below)
- For adoptees born in a **foreign country**, (other than Canada) and adopted in Nevada, submit each of the following:
 - Certified Report of Adoption (will NOT be returned)
 - Certified Nevada District Court Order Decree of Adoption (will NOT be returned)
 - Evidence the adoptive parents are Nevada residents such as an original utility bill
 - Proof the adoptee is a U.S. Citizen such as a US passport or certificate of citizenship
 - Adoptee's original birth certificate, certified translation required if not in English
 - Proper Filing Fee

General Information

- Common Reasons for Rejections: Copies rather than originals, lack of payment, cross-outs, and white outs or corrections
- Fees: Filing Fee \$45.00 (includes one certified copy of the amended birth record)
- Additional Copies are \$25.00 each
- Mail documents and fees to:

Office of Vital Records & Statistics Attn: Adoptions 4150 Technology Way, Suite 104 Carson City, Nevada 89706

For more information, visit the website at http://dpbh.nv.gov/programs/vitalrecords/ or call the Office of Vital Records and Statistics at (775) 684-4242.