FORM NO.1-A FORM NO.1-A

(See rule 5)

BIRTH REPORT FOR ADOPTED CHILD ADOPTED CHILD

Legal information.

(See Reverse for instruction

This part to be added to the Birth Register.

and sent for

(See rule 5) BIRTH REPORT FOR

Statistical information (See Reverse for instruction) This party to be detached statistical processing

To be filled by the informant		To be filled by the informant
1. Date of Birth:		For Religion: Enter appropriate religion "Hindu" or
2. Sex (Enter "Male" or "Female "or "Transgender person:	14	"Muslim" or "Christian" or "Sikh" or "
3. Child's Details (If not named, leave blank): -	17	Buddhist" or "Jain" or "Other(Please specify)
(a) Name, if any:	()	` '
(b) Aadhaar No (If available):	(a)	Religion of Adoptive Father:
4. Father's Details: -		Religion of Adoptive Mother
Name:	(b)	Religion of Adoptive Modici
(d) Aadhaar No. (if available)		Adoptive Father's level of
(e) Mobile No: -	15	. 1
(f) E.mail Id:		education:
5. Mother's Details: -	16	Adoptive Mother's level of education:
Name: -	10	
(d) (a) Aadhaar No. (if available)		Adoptive Father's Occupation
(e) Mobile No: -		Adoptive Mother's occupation
(f) E.mail Id:	17 18	
6. Details of adoption deed /order:		
(a) Date:		
(a) Date: (b) Number of Adoption deed/order:		
7. Adoptive Mother's		
Details:- Name:-		
(a) Aadhaar No. (if available)		
(b) Mobile No:-		
(c) E.mail Id:		
8 Adoptive Fathers		
Details:- Name:-		
(a) (a) Aadhaar No. (if available)		
(a) (a) Addition No. (if available) (b) Mobile No:-		
(c) E.mail Id:		
(c) E.man id.		
9. Address of adoptive parents as recorder in Adoption		
deed/order:		
(a) House No:		
(b) Locality:		
(c) Ward number (in case of town and if available)		
i. Town or Village: Sub- district:		
District: State or Union		
Territory: PIN Code:		
Territory.		
10. Permanent address of adoptive parents:		
(a) House No:		
(b) Locality:		
(c) Ward number (in case of town and if available)		
i. Town or Village: Sub- district:		
District: State or Union		
Territory: PIN Code:		
11. Place of birth(Tick the appropriate entry 1 or 2 or 3		
below and give the name and address of the		
"Hospital/Institution" or the address or the "House" or		
"other place" where the birth took place)		
1. Hospital/ Institution Name:		
2. House 3. Other place Address: House (no:		
Locality: 4. Ward number(in case 12of town		
and if available):		

Town or Village: sub-district: District:	
State or Union Territory: PIN Code:	
12. If adoption through agency write the address of	
the adoption agency:	
(a) House No:	
(b) Locality:	
(c) Ward number (in case of town and if available)	
i. Town or Village: Sub- district:	
District: State or	
Union Territory: PIN Code:	
13. Informant's Details	
(a) Name:	
(b) Aadhaar No. (if available):	
(c) Mobile No:	
(d) E-mail:	
(e) Address: House No:	
(f) Locality Ward number(in case of town	
and if available):	
,	
Town or Village: sub-district: District:	
State or Union Territory: PIN Code:	
 As contained in the original birth certificate: 	
DECLARATION:	
I have furnished true information to the best of	
my knowledge and belief. I am aware of the	
penalties under section 23 of the Registration of	
Births and Deaths Act, 1969 (amended in 2023)	
for submitting false information. Also, I give	
consent, under Aadhaar (Targeted Delivery of	
Financial and Other Subsidies, benefits and	
Services) Act, 2016, for authenticating identity by	
way of Aadhaar authentication.	
way of Addital addiction.	
(4.6.	
(After completing	
all columns 1 to	
18, informant will	
put date and	
signature)	
	(C-lume to be filled one over New out of mature of
Date:- Signature or thumb impression	(Columns to be filled are over. Now put signature at
	left
To Be filled by the registrar	To Be filled by the registrar
10 Be inica by the registral	To be fined by the registral
Registration No:	
Registration Date:	Name Code No.
Registration Unit:	District
Town/ Village:	Sub- District
	Town/village
Sub- District:	
District:	
Remarks (if any)	Designation II-it:
	Registration Unit:
	Registration No:
	Registration Date:
	Sex: Male/ Female/ Transgender:
	Place of Birth: 1. Hospital/institution
	-
Name and signature of the	2. House
Registrar	3. Other place:
- 0	
	Name and signature of the Registrar

Item No.	Completing the Form 1A: BIRTH REPORT FOR ADOPTED CHILD Instructions
1, 6	Date, wherever it occurs, is to be provided in dd-mm-yyyy format, where dd is date in two digits mm is month in two digits and yyyy is year in four digits Wherever the date is written in words i should be written in full e.g 01-01-2023 shall be written as First January two thousand twenty three. If date of birth is unknown, record the date of birth as reflected in adoption order or deed, as the case may be. Use only 'Arabic numerals' such as 0,1,2,3,4,5,6,7,8,9 for recording dates and other numerical entries.
2	Enter "Male" or "Female" or "Transgender Person". Do not use abbreviation.
3,4,5,7,8,1	Name, wherever it occurs, is to be provided in the format of [first name] [middle name] [last name] where full name (not abbreviation) to be written in capital letters and first name is mandatory. There should be minimum two characters in either [first name] or [middle name] or [last name].
9,10,11,12	Address, wherever it occurs, shall contain the name of State or Union Territory, District, Subdistrict, Town or Village, Ward number (in case of town and if available), Locality, House number and PIN Code.
15,16	Level of Education – Write one of following— (Enter the completed level of education e.g. if studied upto class VII but passed only class VI, write class VI)
17,18	Occupation - Write one of following— 1. Cultivator 2. Agriculture Labourer 3. Daily Wages Earner(Other than Agriculture Labourer) 4. Single/Family Worker/Self Employed 5. Employer 6. Government Employee 7. Private Employee(Other than Domestic Helper) 8. Domestic Helper 9. Non-Worker

- Note: The informant responsible for reporting birth event of adopted child shall be as per the Registration of Births and Deaths Act, 1969 (amended in 2023).
- The informant must ensure that no item in the form for Birth Report for Adopted Child is left blank to the extent possible.