



GOVERNMENT OF JAMAICA

1/8

REGISTRAR GENERAL'S DEPARTMENT  
LATE ENTRY OF NAME

SOLD

BE

TO

NOT

An application for Late Entry of Name is acceptable when the following are in place:

- A Statutory declaration is completed by the mother (father or relative, if mother is deceased) stating why child's name was not entered within twelve (12) months of birth and signed in the presence of a Justice of the Peace.
  - A Certificate of Naming is completed by the same person completing declaration.
  - Baptismal Record from the Church where christening took place in the 1st year of birth.
  - School Record from the 1st Primary School attended.
  - Birth application form completed.
  - Fees paid.
-

When replying  
please quote file  
number



REGISTRAR GENERAL'S DEPARTMENT,  
TWICKENHAM PARK,  
SPANISH TOWN P.O. 2/8

S \_\_\_\_\_

20

Sir/Madam,

**Re: Late Entry of Name**

I refer to the application in connection with the birth record and forward herewith a set of forms to be completed and returned to this office with the sum of.....

The Form of Statutory Declaration must be completed by mother or failing her, by someone at least ten years older than .....and who knows of the circumstances surrounding the birth. The declarant must state his or her age, and relationship to ..... full name the exact date, month, year, district and parish of..... birth, the reason why the full name was not added to the record within one year of the date of registration, and the cause of the delay in securing entry on the record before now. This form must be signed in the presence of a Justice of the Peace by the declarant.

The Form of Certificate of Naming must be completed and signed by the same person who makes the above declaration, and.....full name must be entered in the space provided.

The Baptismal Record Form must be completed by the present Minister of the Church at which.....was baptised in infancy and the required particulars must be taken from the Church Baptismal Register.

The School Record Form must be completed by the present Head Teacher of the FIRST PRIMARY SCHOOL attended and the required particulars must be taken from the Admission Register.

If there are no records available a letter to that effect must be submitted by the Minister and the Teacher.

Kindly submit a list of all the children (alive or dead) born to.....mother, giving the full name, the district, parish and approximate year of the birth of each child.

**IMPORTANT**

It is compulsory that the declarant state in his or her declaration the following:

His or her age and relationship to the party in question.

Full name of the party in question.

Full names of the parents of the party in question.

The district, parish and approximate date of birth of the party in question, why no steps were taken before now to have late entry of name effected.

Yours faithfully,

.....  
*for Chief Executive Officer.*

**NOT TO BE SOLD**

LEN No 0039953

**GOVERNMENT OF JAMAICA**  
**REGISTRAR GENERAL'S DEPARTMENT**  
*AN EXECUTIVE AGENCY SINCE APRIL 1999*



**APPLICATION FOR BIRTH CERTIFICATES**

3/8

Please use **BLOCK CAPITAL LETTERS**

*The more information provided, the better the chance for prompt and accurate service.*

I NEED  of the birth certificate for the following individual:

# of COPIES

FIRST NAME								MIDDLE NAME								LAST NAME								
HOSPITAL NAME OR HOME ADDRESS																								
PARISH OF BIRTH																								
DISTRICT OF BIRTH																								

DATE OF BIRTH:

D	M	Y			

BIRTH REGISTRATION #


SEX

MALE  
 FEMALE

DATE OF REGISTRATION

D	M	Y			

MOTHER'S NAME

FIRST NAME								MIDDLE NAME								LAST NAME								

MOTHER'S MAIDEN NAME

--	--	--	--	--	--

FATHER'S NAME

FIRST NAME								MIDDLE NAME								LAST NAME								

NOT TO BE SOLD

APPLICANT'S NAME

FIRST NAME								MIDDLE NAME								LAST NAME								

SIGNATURE

STREET ADDRESS

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

TAX REGISTRATION #									

TOWN/CITY

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

OTHER ID #									

PARISH/STATE/PROVINCE

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

COUNTRY

--	--	--	--	--	--	--	--	--	--

POSTAL/ZIP CODE

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

APPLICANT'S RELATIONSHIP TO CHILD

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

TEL (H)#

--	--	--	--	--	--

CELL#

--	--	--	--	--	--

TEL (W)#

--	--	--	--	--	--

EMAIL

--	--	--	--	--	--	--	--	--	--	--	--

REASONS FOR APPLYING

SCHOOL  
  PASSPORT  
  VISA  
  DRIVER'S LICENCE  
  OTHER \_\_\_\_\_

DATE OF APPLICATION

D	M	Y			

PLEASE SPECIFY

**FOR USE BY RGD ONLY**

DATE	RECORD LOCATED	EXAMINED	ENTERED	APPROVED	PRINTED	DELIVERED
BY						



GOVERNMENT OF JAMAICA  
REGISTRAR GENERAL'S DEPARTMENT  
SCHOOL ADMISSION RECORD

Used By School Officials To Certify Certain Facts About A Child Contained In A School's Official Admission Register.

PLEASE PRINT ALL INFORMATION, EXCEPT SIGNATURES, IN BLOCK CAPITAL LETTERS.

-----  
This is a Copy of the Information Contained in the Official School Admission Register:

Child's \_\_\_\_\_  
Names Christian (First) Middle Surname

Date of BIRTH: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
Sex (Tick One): \_\_\_\_\_ Male

Date of ADMISSION: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
\_\_\_\_\_ Female

Parent/  
Guardian \_\_\_\_\_  
Names Christian (First) Middle Surname

I certify that the above particulars were extracted from the School Admission Register of the \_\_\_\_\_  
\_\_\_\_\_ School,

located at \_\_\_\_\_ in the parish of \_\_\_\_\_  
Street Address or District

\_\_\_\_\_  
*Signature of Principal or  
Head Teacher*

\_\_\_\_\_  
*Date*

NOTE: Kindly affix School Stamp below. If there is no School Stamp, kindly make an appropriate note to this effect on the form, and sign same.

SOLD  
BE  
TO  
NOT



Section 4: (Must be Completed for ALL Purposes)

D E C L A R A T I O N	Names _____
	Christian (First) _____ Middle _____ Surname _____
	Street Address _____
	Town _____ Parish _____
	Relationship to Individual: _____ Age: _____

I, the undersigned, do solemnly and sincerely make this declaration conscientiously believing the information on the reverse to be true, by virtue of the provisions of Cap. 379 of the Voluntary Declaration Law.

Declarant's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Taken and acknowledged before me,

Full Name of Justice of the Peace: \_\_\_\_\_

for the Parish of \_\_\_\_\_

\_\_\_\_\_  
*Signature of Justice of the Peace*

\_\_\_\_\_  
*Date*



Stamp and Seal of Justice of the Peace



GOVERNMENT OF JAMAICA  
REGISTRAR GENERAL'S DEPARTMENT  
(CERTIFICATE OF NAMING—FORM K)

(To Be Completed by a child's PARENT or GUARDIAN to Establish a Name on the record for the child).

Please PRINT All Information In BLOCK CAPITAL LETTERS to avoid errors and to speed processing.

I hereby apply for the stated names to be entered on the Birth Registration Form for the identified child.

SOLD

Declarant's Names \_\_\_\_\_  
Christian (First) Middle Surname

Declarant's Relationship to Child: \_\_\_\_\_

Declarant's Signature

Date

PARTICULARS OF CHILD'S BIRTH:

Date of Birth: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Sex: \_\_\_\_\_ Male  
\_\_\_\_\_ Female

Place \_\_\_\_\_  
Hospital Name or Home Address

of BIRTH: \_\_\_\_\_  
Parish District

Place of Registration: \_\_\_\_\_  
Parish District

Date of Registration: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Day Month Year

Registration (Birth Entry)  
Number: \_\_\_\_\_

Mother's Names \_\_\_\_\_  
Christian (First) Surname Surname before Marriage

Father's Names \_\_\_\_\_  
Christian (First) Middle Surname

CHILD TO BE NAMED:

Christian (First)

Middle

Surname

BE TO

NOT



GOVERNMENT OF JAMAICA

7/8

REGISTRAR GENERAL'S DEPARTMENT  
THE REGISTRATION (BIRTHS AND DEATHS) ACT

Certified Copy of the Record of Infant Baptism (Form J)

Please PRINT All Information, Except Signatures, In BLOCK CAPITAL LETTERS.

This is a copy of the Register Book of Baptisms of the

(Name of Church or Place of Worship)

in the Parish of \_\_\_\_\_ for the Year \_\_\_\_\_

Space for Particulars From the Baptismal Register:

I, \_\_\_\_\_ Minister (or Person) in charge  
of \_\_\_\_\_ in the parish of  
(Name of Church or Place of Worship)

I \_\_\_\_\_, do hereby certify that the Baptismal  
Register of the said Church shows that on the \_\_\_\_\_ day of \_\_\_\_\_ in the Year \_\_\_\_\_,  
the Rev. \_\_\_\_\_ baptised by the Name(s) of  
\_\_\_\_\_, produced as the \_\_\_\_\_  
(son or daughter)  
of \_\_\_\_\_ and \_\_\_\_\_

(Mother's Names)

(Father's Names)

and declared to have been born at \_\_\_\_\_ in the parish of \_\_\_\_\_  
on the \_\_\_\_\_ day of \_\_\_\_\_ in the Year \_\_\_\_\_.

The above entry is a True Copy of the record in the Baptismal Register of the Baptism of the said Child.

Witness my hand this \_\_\_\_\_ day of \_\_\_\_\_ in the Year \_\_\_\_\_.

\_\_\_\_\_  
*Signature of Minister or  
Person in Charge*

SOLD

BE

TO

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