

**FORM NO.1A ( Legal information) (See rule 5)**  
**BIRTH REPORT FOR ADOPTED CHILD**  
 [SEE REVERSE FOR INSTRUCTIONS]  
 This part to be added to the Birth Register

**FORM NO.1A Statistical information (See rule 5)**  
**BIRTH REPORT FOR ADOPTED CHILD**  
 [SEE REVERSE FOR INSTRUCTIONS]  
 This part to be detached and sent for statistical processing

*To be filled by the informant*

1\*. **Date of Birth :**

2\*. **Sex** (Enter "Male" or "Female" or "Transgender person") :

3. **Child's details** (If name is changed on adoption, write new name):-  
 (a) Name of the Child

(b) Aadhaar No. (if available):

4\*. **Mother's Details** (If known):-  
 (a) Name:

(b) Aadhaar No. (if available):

(c) Mobile No:

(d) Email Id:

5\*. **Father's Details** (If known):-  
 (a) Name:

(b) Aadhaar No. (if available):

(c) Mobile No:

(d) Email Id:

6. **Details of adoption deed / order:-**  
 (a) Date:

(b) Number of Adoption deed / order:

7. **Adoptive Mother's Details:-**  
 (a) Name:

(b) Aadhaar No. (if available):

(c) Mobile No:

(d) Email Id:

8. **Adoptive Father's Details:-**  
 (a) Name:

(b) Aadhaar No. (if available):

(c) Mobile No:

(d) Email Id:

9. **Address of adoptive parents as recorded in Adoption deed / order:** House No: \_\_\_\_\_  
 Locality: \_\_\_\_\_ Ward number (in case of town and if available): \_\_\_\_\_  
 Town or Village: \_\_\_\_\_ Sub-district: \_\_\_\_\_ District: \_\_\_\_\_  
 State or Union Territory: \_\_\_\_\_ PIN Code:

10. **Permanent address of adoptive parents:** House No: \_\_\_\_\_ Locality: \_\_\_\_\_  
 Ward number (in case of town and if available): \_\_\_\_\_  
 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 "Institution" or the address of the "House" or "Other place" where the birth took place) :  
 1. Hospital / Institution **Name :** \_\_\_\_\_  
 2. House 3. Other place **Address :** House No. \_\_\_\_\_ Locality: \_\_\_\_\_  
 Ward number (in case of 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:** House No: \_\_\_\_\_  
 Locality: \_\_\_\_\_ Ward number (in case of town and if available): \_\_\_\_\_  
 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) Email Id:

(e) **Address :** House No: \_\_\_\_\_ 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.  
 (After completing all columns 1 to 18, informant will put date and signature)

*To be filled by the informant*

14. **For Religion** [Enter appropriate religion "Hindu" or "Muslim" or "Christian" or "Sikh" or "Buddhist" or "Jain" or "Other (Please specify)"]

(a) **Religion of Adoptive Father:** \_\_\_\_\_

(b) **Religion of Adoptive Mother:** \_\_\_\_\_

15. **Adoptive Father's level of education:** \_\_\_\_\_

16. **Adoptive Mother's level of education:** \_\_\_\_\_

17. **Adoptive Father's Occupation:** \_\_\_\_\_

18. **Adoptive Mother's Occupation:** \_\_\_\_\_

To be detached and sent for statistical processing

Date:  **Signature or left thumb mark of the informant**

*To be filled by the Registrar*

Registration No. : \_\_\_\_\_  
 Registration Date:   
 Registration Unit : \_\_\_\_\_  
 Town / Village: \_\_\_\_\_ Sub-District: \_\_\_\_\_  
 District: \_\_\_\_\_  
 Remarks ( if any): \_\_\_\_\_

Name and Signature of the Registrar

(Columns to be filled are over. Now put signature at left)

*To be filled by the Registrar*

_____	Name	Code No.
_____	_____	_____
_____	_____	_____
_____	_____	_____

Registration Unit : \_\_\_\_\_ Registration No. : \_\_\_\_\_  
 Registration Date:   
 Date of Birth :   
 Sex : Male / Female / Transgender person  
 Place of Birth: 1. Hospital/Institution 2. House 3. Other place

Name and Signature of the Registrar

## Instructions for completing the Form 1A: BIRTH REPORT FOR ADOPTED CHILD

Item No.	Instructions																									
1, 6	<p>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 it should be written in full e.g 01-01-2023 shall be written as First January two thousand twenty three.</p> <p>If date of birth is unknown, record the date of birth as reflected in adoption order or deed, as the case may be.</p> <p>Use only 'Arabic numerals' such as 0,1,2,3,4,5,6,7,8,9 for recording dates and other numerical entries.</p>																									
2	Enter "Male" or "Female" or "Transgender Person". Do not use abbreviation.																									
3,4,5,7,8,13	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].																									
9,10,11,12,13	Address, wherever it occurs, shall contain the name of State or Union Territory, District, Sub-district, Town or Village, Ward number (in case of town and if available), Locality, House number and PIN Code.																									
15,16	<p>Level of Education – Write one of following—</p> <table border="1"> <tbody> <tr> <td>1.Pre-Primary</td> <td>6.Class 5</td> <td>11.Class 10</td> <td>16. Bachelor / Undergraduate</td> <td>21. Literate without formal education</td> </tr> <tr> <td>2.Class 1</td> <td>7.Class 6</td> <td>12.Class 11</td> <td>17. PG Diploma</td> <td>22. Illiterate</td> </tr> <tr> <td>3.Class 2</td> <td>8.Class 7</td> <td>13.Class 12</td> <td>18. Master / Post graduate</td> <td></td> </tr> <tr> <td>4.Class 3</td> <td>9.Class 8</td> <td>14.ITI</td> <td>19. M.Phil</td> <td></td> </tr> <tr> <td>5.Class 4</td> <td>10.Class 9</td> <td>15.Diploma / Certificate</td> <td>20. Doctorate &amp; above</td> <td></td> </tr> </tbody> </table> <p>(Enter the completed level of education e.g. if studied upto class VII but passed only class VI, write class VI)</p>	1.Pre-Primary	6.Class 5	11.Class 10	16. Bachelor / Undergraduate	21. Literate without formal education	2.Class 1	7.Class 6	12.Class 11	17. PG Diploma	22. Illiterate	3.Class 2	8.Class 7	13.Class 12	18. Master / Post graduate		4.Class 3	9.Class 8	14.ITI	19. M.Phil		5.Class 4	10.Class 9	15.Diploma / Certificate	20. Doctorate & above	
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17,18	<p>Occupation - Write one of following—</p> <ol style="list-style-type: none"> <li>1. Cultivator</li> <li>2. Agriculture Labourer</li> <li>3. Daily Wages Earner(Other than Agriculture Labourer)</li> <li>4. Single/Family Worker/Self Employed</li> <li>5. Employer</li> <li>6. Government Employee</li> <li>7. Private Employee(Other than Domestic Helper)</li> <li>8. Domestic Helper</li> <li>9. Non-Worker</li> </ol>																									

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.