

**Ohio Department of Job and Family Services
Ohio Putative Father Registry
255 E. Main Street, 3rd Floor
Columbus, Ohio 43215-5222
Phone: 1-888-313-3100**

**APPLICATION FOR SEARCH OF OHIO PUTATIVE FATHER REGISTRY
“Registration Form for Fathers”**

The following information, if it is complete and submitted within 30 days of the child’s birth, will enable you to be notified in the case of an adoption proceeding involving a child of whom you may be the father.

IDENTIFYING INFORMATION ABOUT THE FATHER:

Father’s		
LAST Name _____	FIRST Name _____	MIDDLE Name _____
Social Security Number _____	Phone Number (000/000/0000) _____	
Date of Birth (MM/DD/YY) _____	Race _____	
Other names by which father may be known: _____		
Address Street Number _____	Street Name _____	
City _____	State _____	Zip _____
Father’s Mailing Address/Apt. (If different than above)		
Street Number _____	Street Name _____	
City _____	State _____	Zip _____

IDENTIFYING INFORMATION ABOUT THE MOTHER:

Mother’s		
LAST Name _____	FIRST Name _____	MIDDLE Name _____
Social Security Number _____	Phone Number (000/000/0000) _____	
Date of Birth (MM/DD/YY) _____	Race _____	
Other names by which mother may be known: _____		
Address Street Number _____	Street Name _____	
City _____	State _____	Zip _____
Mother’s Mailing Address/Apt. (If different than above)		
Street Number _____	Street Name _____	
City _____	State _____	Zip _____

IDENTIFYING INFORMATION ABOUT THE CHILD:

Child's LAST Name _____ FIRST Name _____ MIDDLE Name _____		
Race _____	SEX CHECK ONE	<input type="checkbox"/> Male <input type="checkbox"/> Female
Date of Birth (MM/DD/YY) _____	Estimated Due Date of Mother (MM/YY) _____	
Child's Birthplace City _____	State _____	
Hospital name, if any: _____		
<input type="checkbox"/> Birth Certified	<input type="checkbox"/> Father Certified By State	<input type="checkbox"/> Multiple Birth

INFORMATION ABOUT INTERESTED PARTY REQUESTING SEARCH OF PUTATIVE FATHER REGISTRY:

If Firm or Agency, Name _____	
Name of Person(s) Requesting Search _____	
Phone Number (000/000/0000) _____	Fax Number (000/000/0000) _____
Person Requesting Search is:	
<input type="checkbox"/> Mother of Child	<input type="checkbox"/> Child Welfare Agency
<input type="checkbox"/> Attorney representing Mother of Child	<input type="checkbox"/> Attorney representing Child Welfare Agency
<input type="checkbox"/> Attorney arranging a Minor's Adoption	
Address for Notice of Search Results	
Street Number _____	Street Name _____
City _____	State _____ Zip _____
I certify that the information provided in the Search Request Form is true and correct to the best of my knowledge. I further certify that I am requesting this search of the Putative Father Registry to determine whether a putative father is registered in relation to the child referenced above, who is or may be the subject of an adoption petition, and the information obtained will be used for this purpose only.	
Signature of individual requesting search _____	

I have read, or someone has read to me, the instructions to Putative Fathers before signing this form, and I understand that completing this form is not enough to protect my rights to be legal father of the child identified on this form. For further information on filing a parentage action form contact:

Office of Child Support Enforcement
Ohio Department of Job and Family Services
50 W. Broad Street, 4th Floor
Columbus, Ohio 43215
1-800-686-1556 (in Ohio), or (614) 752-9743

I certify that the information provided above is true and correct to the best of my knowledge. I understand that a person who knowingly or intentionally registers false information on this form commits a Misdemeanor of the First Degree.

I understand that I must tell the Putative Father Registry, if I change my address or if any other information changes on the form, so that I can be located if the child I have identified becomes the subject of an adoption.

Signature of Putative Father _____	Date _____
STATE OF _____, County of _____,	
Before me, a Notary Republic in and for said County and State, personally appeared _____	
who, have been duly sworn upon his/her oath, stated the foregoing representatives are true this _____ day of _____	

**OHIO DEPARTMENT OF JOB AND FAMILY SERVICES
APPLICATION FOR SEARCH OF OHIO PUTATIVE FATHER REGISTRY
REGISTRATION FORM
“Registration Form for Fathers”**

Read and follow carefully:

- A. Under Ohio law, a “putative father” is a male who may be a child’s father, but who is not married to the child’s mother on or before the date that the child is born, or who has not established paternity of the child in a court proceeding before the filing of an adoption petition for the child.
- B. If you believe you may be a putative father, and if you wish to be notified of an adoption proceeding involving a child of whom you are, or may be, the father, you should complete the Putative Father Registration form (JFS 01694) and return it to the Ohio Putative Father Registry office.
- C. It is your responsibility to be sure that the information contained on the form is accurate and complete. Failure to provide accurate information may result in your not receiving notice of an adoption of the child, and you may lose any parental rights you might have in relation to the child.
- D. The address you provide must be an address at which you can be contacted. A post office box is not acceptable. If you cannot be contacted at the address you provide, you may not receive notice of an adoption and you may lose any rights you may have had in relation to the child.
- E. If you do not have an address where you can receive notice of an adoption, you may designate another person as your agent.
- F. **IMPORTANT!** If your address or any other information on the form changes, you must file an amended registration form immediately. Your failure to do so could cause you to lose the opportunity to receive notice of an adoption and to lose any parental rights you may have in relation to the child.
- G. **IMPORTANT!** In order for you to receive notice of an adoption, you must register no later than 30 days after the birth of the child. You **MAY** register prior to the birth of the child.
- H. If you have questions about your rights as a putative father, you should consult an attorney.
- I. You must submit the completed, signed, and notarized form either in person, by mail, or express mail delivery service to:

**Ohio Department of Job and Family Services
Ohio Putative Father Registry
255 E. Main Street, 3rd Floor
Columbus, Ohio 43215-5222**