

# UTAH FATHER'S WORKSHEET FOR VOLUNTARY DECLARATION OF PATERNITY

## FATHER'S INFORMATION

First Name \_\_\_\_\_ Middle \_\_\_\_\_ Last \_\_\_\_\_  
 Date of Birth (MM/DD/YYYY) \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Suffix (Jr, Sr, etc.) \_\_\_\_\_  
 State of Birth \_\_\_\_\_ Country of Birth \_\_\_\_\_  
 Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Furnishing parent(s) social security number(s) is required by Federal Law, 42 U.S.C. 405 Section 205 (c ) (2) (C) (ii) of the Social Security Act. The number will be made available to the State Social Services Agency to assist with child support enforcement activities and to the Internal Revenue Service for the purpose of determining Earned Income Tax Credit compliance.

### Usual/Current Residence

Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_  
 Inside the city limits?  Yes  No

### Mailing Address (if different from above)

Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Country \_\_\_\_\_

### Confidential information for medical and health use only.

This information is protected under the Vital Statistics Act and Rules. Responding to the questions in this section is important and confidential as this information is used for health and statistical purposes to help guide public health policy and programs such as Birth Defect Network, Immunization Registry, Medicaid and Baby Your Baby

### Level of Schooling Completed (check the box that best describes the father's education)

- |  |  |
|--|--|
| <input type="checkbox"/> 8th grade or less                     | <input type="checkbox"/> 9th-12th Grade, No Diploma        |
| <input type="checkbox"/> High School Graduate or GED Completed | <input type="checkbox"/> Some College Credit but no degree |
| <input type="checkbox"/> Associate Degree                      | <input type="checkbox"/> Bachelor's Degree                 |
| <input type="checkbox"/> Master's Degree                       | <input type="checkbox"/> Doctorate                         |
| <input type="checkbox"/> None                                  | <input type="checkbox"/> Unknown                           |

### Hispanic Origin (Check all that apply)

- Yes  No, not Spanish/Hispanic/Latino

If yes, check all that apply

- Mexican, Mexican American, Chicano  Puerto Rican  Cuban  
 Other Spanish/Hispanic/Latino (specify) \_\_\_\_\_

### Race (Check all that apply)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> White  | <input type="checkbox"/> Native Hawaiian | <input type="checkbox"/> Samoan                |
| <input type="checkbox"/> Black or African American  | <input type="checkbox"/> Filipino        | <input type="checkbox"/> Tongan                |
| <input type="checkbox"/> Chinese  | <input type="checkbox"/> Asian Indian    | <input type="checkbox"/> Vietnamese            |
| <input type="checkbox"/> Japanese   | <input type="checkbox"/> Korean          | <input type="checkbox"/> Guamanian or Chamorro |
| <input type="checkbox"/> American Indian or Alaska Native (name of enrolled or principal tribes) _____    |  |  |
| <input type="checkbox"/> Other Asian (specify) _____  |  |  |
| <input type="checkbox"/> Other Pacific Islander (specify) (excludes Samoan/Tonga check above boxes) _____ |  |  |
| <input type="checkbox"/> Other (specify) _____  |  |  |

Child's Current Name: \_\_\_\_\_

Child's New Name: \_\_\_\_\_