

**Mail Application and Fee to:**

Vital Records Changes  
P.O. Box 30721  
Lansing, MI 48909

Michigan Department of Health  
and Human Services  
[www.michigan.gov/vitalrecords](http://www.michigan.gov/vitalrecords)

**Application to Correct or Change a Michigan Birth Record**

If any information is unknown, please indicate "unknown". Incomplete applications will be returned.

**APPLICANT INFORMATION** Must be 18 years old or older **Copy of valid Identification required**

Full Name: (First) (Middle) (Last)  
**Your New Legal First Name** **Your New Legal Middle Name** **Your New Legal Last Name**  
Address: City/State: Zip:  
**Your Street Address** **Your City & State** **Your Zip Code**  
Phone: Email:  
**Your Phone Number** **Your Email Address**


**ELIGIBILITY**

- ☒ Child named on the record (Adult) ☐ Legal guardian of the person named on the record  
☐ Parent named on the record ☐ Legally licensed representative of the person named on the record

**TYPE OF CHANGE OR CORRECTION REQUESTED**

- ☐ Correct/Change birth record for adult ☒ Court ordered legal name change. (Court order required)  
☐ Correct/Change birth record for minor ☐ Remove a person who is not the biological parent (Court order required)  
☐ Name change for parents who have married after the birth (Marriage record required)

**CHILD'S INFORMATION NEEDED TO LOCATE CURRENT BIRTH CERTIFICATE**

Full Name on Birth Certificate: Date of Birth:  
**Your Full Old Name On The Birth Certificate** **Your Date of Birth**  
Other Names Used:  
☐ Adoption ☐ Legal name change **Check box that matches birth certificate**   
Place of Birth (City and County): **Your Birth City & Country** Gender: ☐ Male ☐ Female ☐ X

**PARENTS' INFORMATION ON CHILD'S CURRENT BIRTH CERTIFICATE**

Mother/Parent Full Name at Birth: Date of Birth:  
**Mothers Full Name On Birth Certificate** **Mothers Date of Birth**  
Father/Parent Full Name at Birth: Date of Birth:  
**Fathers Full Name On Birth Certificate** **Fathers Date of Birth**

<b>CHANGES REQUESTED: Item as it currently appears</b>		<b>INFORMATION AS IT SHOULD APPEAR</b>	
<b>Your Old Full Legal Name</b>		<b>Your New Full Legal Name</b>	

**SIGNATURE(S) REQUIRED TO PROCESS APPLICATION** If correcting a child's name all parents listed on record must sign.  
If correcting a child's name that is over the age of 15 and it is not court ordered, we also require the child's signature.

Signature of Person Requesting Change: Date: **Today's Date**  
**Your New Legal Signature**  
Other Signature: Date:

**PAYMENT** Check or Money Order made out to the "State of Michigan" Application Fee is Non-Refundable

Application Fee:	\$50.00 (includes one copy)	\$50.00
Additional Certified Copies:	\$16.00 each	\$
RUSH Fee	\$25.00	\$
TOTAL ENCLOSED:		\$ 50.00

**REQUIRED DOCUMENTATION** Do not send original documents they will not be returned to you

Changes or corrections to birth records that can be made by this office are limited by law and are subject to very specific supporting documentation.

- In general, we require at least two (2) dated documents proving the correct information. Documents usually need to be at least five years old or older. Some changes require documents dated close to the time of birth.
- If you are changing the name on a birth certificate for a person over the age of one (1) and do not have documents to prove you have always used that name, you will have to petition the court in your county for a legal name change order and submit a copy of the court order to our office.
- To correct parent's information on a birth certificate we generally need a copy of the parent's birth certificate, marriage license or two documents dated five years old or older showing the correct information.

For more information on documents needed, visit our FAQ's on our website at [www.michigan.gov/vitalrecords](http://www.michigan.gov/vitalrecords) You can also call our Changes Unit at **517-335-8660** or email [MDHHS-VR-Changes@Michigan.gov](mailto:MDHHS-VR-Changes@Michigan.gov).

**ELIGIBILITY**

Must be at least 18 years old or legally emancipated. Legal guardians must include a copy of the court guardianship documents. Legally licensed representatives must provide documentation on official letterhead documenting that he/she represents the person named on the record and provide their state bar license number, along with client's identification

**IDENTIFICATION REQUIREMENT** Do not send original documents they will not be returned to you

To change a Michigan birth record, a current valid, government issued identification is required to establish eligibility.

If you are correcting a child's name, we require identification for all parents listed on the record. If a child's name change is court ordered, we only require identification for one parent.

Please send one of the following unexpired identifications:

- ✓ U.S. or U.S. Territories **Driver's License** or **Identification Card**
- ✓ U.S. or Foreign Passport
- ✓ U.S. Passport Card
- ✓ U.S. Military Identification Card with **both** picture and signature
- ✓ Other U.S. or U.S. Territories issued document that meets the following criteria: Document must be unexpired. Document must contain a photograph and at least the following information: name, date of birth, date of expiration, signature, and address.

If you do not have identification as listed above, we will accept other documents to prove your identity. For a list of alternative documents please visit our website at [www.michigan.gov/vitalrecords](http://www.michigan.gov/vitalrecords) or call our office at 517-335-8666.

**PROCESSING TIME**

Normal processing time to correct or change a Michigan birth certificate is 5-6 weeks if all required documents are received. If we must contact you for additional documentation, the processing time starts when we receive everything needed. If you pay for RUSH service, processing time is 2-3 weeks from when everything is received. Processing time is not guaranteed. There could be situations out of our control that cause processing times to be longer or shorter.

Note: Applications sent to the Vital Records post office box with an overnight delivery are not received in Vital Records for three (3) days.

**PENALTIES**

Any person who willfully and knowingly makes false application to change a Michigan birth record may be fined and/or imprisoned pursuant to MCL 333.2894(1)(b) and (c)

The Michigan Department of Health and Human Services (MDHHS) does not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, genetic information, sex, sexual orientation, gender identity or expression, political beliefs, or disability.



## STATE OF MICHIGAN SEX DESIGNATION FORM

Note: Only forms with original signatures are accepted. Faxed or photocopied forms will be rejected. This form only applies to the sex designation on your Michigan Birth Certificate. It does not affect any other municipal, state, or federal identification. This form is not a name-change document. To have your name legally changed on your birth certificate, you must submit a court ordered legal name change. Visit [www.Michigan.gov/VitalRecords](http://www.Michigan.gov/VitalRecords) for more information.

Name: Your Old Full Legal Name  
(Person named on record)

Date of Birth: Your Date of Birth  
(Month / Day / Year)

I declare that the foregoing is true and correct.

I request that the sex designation on the birth certificate be changed from:

From:	To:
<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> X*      ← <b>Check Old Designation</b>	<input type="checkbox"/> Male <input type="checkbox"/> Female <input type="checkbox"/> X*      ← <b>Check New Designation</b>

\*(X is inclusive of all designations other than male and female, including intersex and unknown).

I hereby affirm that this request to change the sex designation on my or my child's Michigan Birth Certificate is to ensure that the birth certificate accurately reflects my or my child's identity and is not for fraudulent or other illegal purposes. I understand that if I have provided false information, I may be subject to civil and criminal penalties. (MCL 333.2894)

SIGNATURE OF PERSON ON RECORD: Your Old Legal Signature      DATE: Today's Date

PARENT/GUARDIAN SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

-To sign you must be the person named on the record 18 years old or older.

-If under 18 a parent or legal guardian's signature is required.

-If the child is over 15 years old, we require both the parent or guardian's signature and the child's signature.