



Child's Name \_\_\_\_\_

**To be filled out by the office**  
**Identity Verification**

<u>Place of Birth</u>	<u>Birth Date</u>	<u>Birth Certificate Number</u>	<u>Date Issued</u>

**Other Form of Proof:**

**Staff name that viewed/completed document:**

**Date:**

\_\_\_\_\_

\_\_\_\_\_

**Name of Parent/Identification Provided:**

\_\_\_\_\_

Proof of the child's identity and age may include a certified copy of the child's birth certificate, birth registration card, notification of birth (hospital, physician or midwife record), passport, copy of the placement agreement or other proof of the child's identity from a child placing agency, record from a public school in Virginia, or certification by a principal or his/her designee of a public school in the U.S. that a certified copy of the child's birth record was previously presented.

Viewing the child's proof of identity is not necessary when the child attends a public school in Virginia and the center assumes responsibility for the child directly from the school (i.e. after school program) or the center transfers responsibility of the child directly to the school (i.e. before school programs) While programs are not required to keep the proof of the child's identity, documentation of viewing this information must be maintained for each child.