Ohio Department of Job and Family Services APPLICATION FOR SEARCH OF OHIO PUTATIVE FATHER REGISTRY

Ohio Putative Father Registry P.O. Box 183204 Columbus, Ohio 43218

Phone: 1-888-313-3100 / Fax: (614) 728-6726

OhioPFR@jfs.ohio.gov

Please perform a search of the Ohio Putative Registry. Please advise if a Putative Father Registration form is on file with respect to the mother, child or father identified below.

SECTION I: IDENTIFYING	G INFORMATION A	BOUT THE MOTHER	2			
Mother's LAST Name	FIRST Nan	ne	MIDDLE Name			
Social Security Number		Phone Number	I			
Date of Birth (MM/DD/YY)		Race				
Other names by which mother may be known 1.		3.				
2.		4.				
Home Address		<u> </u>				
City, State, Zip						
Mother's Mailing Address/Apt. (If di	fferent than above)					
City, State, Zip						
SECTION II: IDENTIFYING	INFORMATION ABO	OUT THE FATHER				
Father's LAST Name	FIRST Name		MIDDLE Name			
Social Security Number		Phone Number				
Date of Birth (MM/DD/YY)		Race				
Other names by which father may be known 1.		3.				
<u> </u>		4.				
Home Address		I				
1						
City, State, Zip						
City, State, Zip Father's Mailing Address/Apt. <i>(If dit</i>	ferent than above)					

JFS 01695 (Rev. 3/2015) Page **1** of **2**

SECTION III: IDENTIFYING INF	ORMATION ABO	UT THE CHIL	_D		
Child's LAST Name	FIRST Name			MIDDLE Name	
Race	-	Sex Male	е	Female	
Estimated Due Date of Mother (MM/YY)	Child's Date	Child's Date of Birth (MM/DD/YY)			
Child's Birthplace City State	Hospital Na	Hospital Name, if any			
Birth Certified	Multiple Bir	th			
Yes No	Y	'es	No		
SECTION IV: INFORMATION A	BOUT INTEREST	ED PARTY F	REQUES	TING SEARCH OF REGISTRY	
Name of Firm or Agency (if applicable)					
Name of Person(s) Requesting Search	Email Addr	Email Address			
Phone Number	Fax Numbe	Fax Number			
Address for Results to be Sent to:					
City, State, Zip					
Person requesting search is:					
Attorney Arranging Adoption of	Minor				
Mother of Child					
Public Children Services Agend	cy (PCSA)				
Private Child Placing Agency (I	PCPA)				
Private Non-custodial Agency ((PNA)				
Reason for search is:					
Termination of Parental Rights	Date	Date of TPR Hearing			
Permanent Custody Hearing:	Date	Date of Permanent Custody Hearing			
Private Adoption	Date	Date of Permanent Surrender or Consent			
Other		Reason			
certify that I am requesting this searc	ch of the Putative Fat	ther Registry to	determine	rect to the best of my knowledge. I further e whether a putative father is registered in ion petition, and the information obtained	
Signature of Individual Requesting Sear			Date		
SECTION VI: TO BE COMPLET	ED BY THE OHIO	PUTATIVE	FATHER	REGISTRY	
Date Request Received (MM/DD/YY)		Search Request Record Locator Number			
Date Response sent to Agency/Attorney	Response Sent to	o Father NO	N/A	Date Response Sent to Father	

JFS 01695 (Rev. 3/2015) Page 2 of 2