

## ACKNOWLEDGMENT OF PATERNITY

### INSTRUCTIONS TO UNMARRIED PARENTS:

1. If the mother was not married at the time of conception or birth or any time between, the mother and natural father must complete Section II of this form.
2. If the mother was married at the time of conception or birth or any time between, the mother and natural father must complete Section II and the mother and husband must complete Section III.

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### SECTION I

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#### Advisement to Unmarried Parents

If the mother and father of the child are not married it is important for the parents to acknowledge paternity of the child. The following is information about acknowledging paternity and the rights and responsibilities that are connected to acknowledging paternity.



When the Acknowledgment of Paternity is signed, the mother and father are agreeing that they are aware of the following:

- The mother and father have signed the Acknowledgment of Paternity of their own free will.
- The mother and father understand that acknowledging paternity means they are saying they are the mother and the father of the named child for all purposes.
- The Acknowledgment of Paternity establishes a legal parent/child relationship.
- The Acknowledgment of Paternity may be used in any legal actions about the child.
- The mother and father know they may have to pay financial and medical support for the child.
- After signing the Acknowledgment of Paternity, the father's name will be put on the child's birth certificate.
- The Acknowledgment of Paternity does not give either the mother or the father custody or visitation rights. They will have to go to court for these and other rights or responsibilities to be decided.
- The mother and/or the father may choose not to acknowledge paternity.
- The mother and/or the father have the right to talk to an attorney, have an attorney represent them; have genetic tests done; ask the court to decide on paternity and/or acknowledge paternity later. The mother and/or the father have the right to know about any court hearing on paternity and may take witnesses to court and cross examine witnesses.
- The mother and/or the father may change their mind about acknowledging paternity after signing this form. Under Colorado law, the Acknowledgment of Paternity will be a legal finding of paternity within sixty days after the mother and father sign it. If either the mother or the father changes their mind, they must contact their county Child Support Enforcement office or a private attorney or the court within 60 days after signing it or before any legal action is taken with the child and the parent(s), whichever is first. Genetic tests for paternity may be done and the mother or the father may have to pay for the genetic tests.
- The rights and responsibilities connected to acknowledging paternity are recorded and may be heard on the telephone number below:

**Telephone Number for Calls Within the Denver-Metro Area: (303) 894-2088**  
**Toll-free Telephone Number for Calls Outside of the Denver-Metro Area: 1-888-839-3494**  
**Available 24 hours per day, 7 days per week**

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- There is no charge to you for processing this form if it is completed at the hospital with the original Certificate of Live Birth. Leave this form with the hospital staff who will mail it to the Colorado Vital Records Section for you.
  - If this form is completed after the hospital's deadline for completing the Certificate of Live Birth, take or mail this form for approval to the Colorado Certification Section at the address below. There is a \$20.00 charge to add the father's name to the birth certificate. If you want a copy of the birth certificate with the father's name added, the fees are \$15.00 for the first copy and \$6.00 for each additional copy of the same record ordered at the same time. Return this witnessed form, fees and a long self-addressed envelope to:

COLORADO DEPARTMENT OF PUBLIC HEALTH & ENVIRONMENT  
CERTIFICATION SECTION-HSVRD-VR-A1  
4300 Cherry Creek Drive South  
Denver, Colorado 80246-1530  
(303) 692-2230

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**PLEASE BE ADVISED THAT THERE ARE PENALTIES INCLUDING THOSE PURSUANT TO C.R.S. 18-5-114  
FOR FALSELY WITNESSING THIS DOCUMENT**

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**COMPLETE AND SIGN IN BLACK INK**

**SECTION II**

**FATHER**

I, \_\_\_\_\_, acknowledge that I am the natural father of \_\_\_\_\_, child  
(Print Father's Full Name) (Print Child's Name at Birth)  
of myself and \_\_\_\_\_, born on \_\_\_\_\_, in \_\_\_\_\_,  
(Print Mother's Maiden Name) (mm/dd/yyyy) (city)  
\_\_\_\_\_ County, Colorado and request that my name be entered on the birth certificate as father of this child.

**Father's Information for Completion of the Birth Certificate:**

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| 1. Father's Date of Birth ____/____/19____                       | 4. Father's Race _____<br>(American Indian, Alaskan Native, Black, African American, Asian<br>Native Hawaiian/Pacific Islander, White) |
| 2. Father's State or Foreign Country of Birth _____              | 5. Hispanic Origin (Yes or No) ____ If yes, specify _____<br>(Mexican, Puerto Rican, Spanish, etc.)                                    |
| 3. Father's Education _____<br>(Specify highest grade completed) |  |

We agree the child's name shall be shown on the birth certificate as:

\_\_\_\_\_  
(Print First Name)

\_\_\_\_\_  
(Print Middle Name)

\_\_\_\_\_  
(Print Last Name)

**FATHER**

I have been provided with written and oral advisements of my rights and responsibilities. I freely sign this Acknowledgment of Paternity. I understand this Acknowledgment of Paternity will be a legal finding of paternity in 60 days or when a legal action concerning the child and me is filed, whichever comes first.

\_\_\_\_\_  
**Signature of Father**

Address: \_\_\_\_\_

Daytime Telephone Number: (\_\_\_\_) \_\_\_\_\_

Social Security Number: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Witness**

**Date**

Name of Witness (Please Print): \_\_\_\_\_

Address of Witness: \_\_\_\_\_

Daytime Telephone Number of Witness: (\_\_\_\_) \_\_\_\_\_

**MOTHER**

I have been provided with written and oral advisements of my rights and responsibilities. I freely sign this Acknowledgment of Paternity. I understand this Acknowledgment of Paternity will be a legal finding of paternity in 60 days or when a legal action concerning the child and me is filed, whichever comes first.

\_\_\_\_\_  
**Signature of Mother**

Address: \_\_\_\_\_

Daytime Telephone Number: (\_\_\_\_) \_\_\_\_\_

Social Security Number: \_\_\_\_\_

\_\_\_\_\_  
**Signature of Witness**

**Date**

Name of Witness (Please Print): \_\_\_\_\_

Address of Witness: \_\_\_\_\_

Daytime Telephone Number of Witness: (\_\_\_\_) \_\_\_\_\_

**SECTION III**

**HUSBAND**

I, \_\_\_\_\_, hereby acknowledge that I was married to \_\_\_\_\_,  
(Print Husband's Full Name) (Print Mother's Maiden Name)  
at the time of conception or birth of \_\_\_\_\_, and I am **NOT** the natural father of this child.  
(Print Child's Name at Birth)

**HUSBAND**

**MOTHER**

I acknowledge that I was married to the man named above at the time of conception or birth of the child named above; however, he is not the natural father of this child.

\_\_\_\_\_  
**Signature of Husband**

\_\_\_\_\_  
**Signature of Mother**

\_\_\_\_\_  
**Signature of Witness**

**Date**

Name of Witness (Please Print): \_\_\_\_\_

Address of Witness: \_\_\_\_\_

Daytime Telephone Number of Witness: (\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
**Signature of Witness**

**Date**

Name of Witness (Please Print): \_\_\_\_\_

Address of Witness: \_\_\_\_\_

Daytime Telephone Number of Witness: (\_\_\_\_) \_\_\_\_\_