Registry of Births, Deaths and Marriages Victoria

STATUTORY DECLARATION

Parent whereabouts unknown

If the father or second parent is not completing the birth registration statement, you must complete this statutory declaration explaining why they are not participating.

# Instructions

1. Complete the Declaration section below. **Don’t sign it yet.**

2. Find a person authorised to witness a statutory declaration. Ask them to fill out the ‘Witness’ section.

3. You must say aloud, in front of the witness:

*“I, [full name] of [address], declare that the contents of this statutory declaration are true and correct.”*

4. Sign the declaration in front of the witness.

# Declaration

|  |  |
| --- | --- |
| I, (mother’s or first parent’s full name): |  |
| of (residential address): |  |
| and (occupation): |  |

make the following statutory declaration under the *Oaths and Affirmations Act 2018*:

|  |  |
| --- | --- |
| 1. I am the mother or first parent of: (child’s full name): |  |
| 1. who was born on: (child’s date of birth)   (Format DD/MM/YYYY) |  |
| 1. The full name of the father or second parent of the above child is: |  |
| 1. The nickname of the father or second parent of the above child is: |  |

1. The current whereabouts of the father or second parent of the above child is unknown to me.
2. The last known contact details for the father or second parent of the above child is:

|  |  |
| --- | --- |
| Address: |  |
| Phone number: |  |
| Email: |  |

1. The circumstances under which the father or second parent disappeared, or cannot be contacted are:

|  |
| --- |
|  |

1. The actions I have taken to contact the father or second parent of the above child are:

|  |  |
| --- | --- |
| 1 |  |
| 2 |  |
| 3 |  |
| 4 |  |

**I declare that the contents of this statutory declaration are true and correct and I make it knowing that making a statutory declaration that I know to be untrue is an offence.**

# Signature

## Signature of person making the declaration

(in the presence of a qualified witness)

Please sign. (Do not type)

|  |  |
| --- | --- |
| Declared at (place) |  |
| In (state or territory) on (Format DD/MM/YYYY) |  |

# Witness

## Witness’ signature

I am an authorised statutory declaration witness and I sign this document in the presence of the person making the declaration.

**Signature of witness**

Please sign. (Do not type)

|  |  |
| --- | --- |
| Date (Format DD/MM/YYYY) |  |

## Witness’ details

|  |  |
| --- | --- |
| Family name (surname) |  |
| Given name (first name) |  |
| Other given name(s) (middle name) |  |

## Personal or professional address of witness

|  |  |
| --- | --- |
| Street number and name |  |
| Suburb/town |  |
| State |  |
| Postcode |  |
| Country |  |
| Phone number |  |
| Email address |  |
| Qualification of witness |  |

A person authorised under section 30(2) of the Oaths and Affirmations Act 2018 to witness the signing of a statutory declaration.