

South Carolina Department of Social Services
RESPONSIBLE FATHER REGISTRY REGISTRATION

SECTION I: Identifying Information About the Registrant Father

Fields marked by an asterisk (*) are required.

*Father's Last Name: _____ *First Name: _____ Middle Name: _____

*Date of Birth: (mm/dd/yy) _____ *Race: _____ Telephone: _____

Other names which father may be known: 1. _____ 2. _____

*Residential Address: _____

*City: _____ *State: _____ *County: (Required for SC residents only) _____ *Zip: _____

Father's Mailing Address: (If different than above) _____

City: _____ State: _____ If state is SC, then list county: _____ Zip: _____

SECTION II: Information About the Mother of Child for Which Paternity is Claimed

Fields marked by an asterisk (*) are required.

*Mother's Last Name: _____ *First Name: _____ Middle Name: _____

*Date of Birth: (mm/dd/yy) _____ *Race: _____ Telephone: _____

Other names which mother may be known: 1. _____ 2. _____

Mother's Residential Address: _____

City: _____ State: _____ If state is SC, then list county: _____ Zip: _____

Mother's Mailing Address: (If different than above) _____

City: _____ State: _____ If state is SC, then list county: _____ Zip: _____

SECTION III: Identifying Information About the Child for Which Paternity is Claimed

Child's Last Name: _____ First Name: _____ Middle Name: _____

Child's Race: _____ Sex: Male Female

Other names which child may be known: 1. _____ 2. _____

Estimated Date of Conception: (mm/dd/yy) _____ State of Conception: _____

County of Conception: _____ Child's Date of Birth: (mm/dd/yy) _____

Child's Birth Place: City: _____ State: _____ County: (If state is SC) _____

Hospital Name: (If known) _____

Multiple Birth? Yes No (When a woman delivers more than one baby at a time. If you select yes, please register each child separately.)

SECTION IV: Acknowledgement

I am on notice of the following penalty in SC Code Section 63-8-820(R) (2) for filing false claims: "A person who knowingly, maliciously, or in bad faith files a false claim of paternity with the registry is guilty of a misdemeanor and, upon conviction, must be fined not more than five hundred dollars or imprisoned for not more than thirty days, or both."

Signature of Putative Father

Date

**Mail this form to: South Carolina Department of Social Services, Responsible Father Registry
P.O. Box 1520
Columbia, SC 29202**