



DECLARATION OF PATERNITY

PURPOSE:

This document legally established the father and child relationship when the father is not married to the child's mother. It allows the father's name to be on the child's birth certificate. It creates certain legal rights and responsibilities for the mother, father, and child.

INSTRUCTIONS FOR PARENTS:

Please read the entire form and complete it carefully. Fill out Section I together. The father fills out Section II. The mother fills out Section III. Fill out Sections II and III in the presence of a witness. Have the witness sign Sections II and III. This is a legal document. Please read and complete carefully. **Do not sign this form if you do not understand what it means.**

STATEMENT OF RIGHTS

Local law gives parents rights in a legal action to determine the existence of the parent and child relationship. These rights include:

1. To a hearing to determine if the man is the biological father of the child;
2. To have blood or genetic testing to prove that the man is the biological father of the child; and
3. To have a lawyer represent them to fight paternity (you must provide your own attorney).

WAIVER OF RIGHTS

IMPORTANT: By signing this Declaration of Paternity, you give up the rights listed above.

I understand that I may cancel this Declaration of Paternity by stating in writing that I am revoking the Declaration. I understand I must sign the Revocation before a Notary Public. I understand I must file the Revocation with the Department of Public Health and Social Services, Vital Statistics, within sixty (60) days after I complete this Declaration. I have read and understood the Statement of Rights (above).

Father's Initials: _____

Mother's Initials: _____

I. Child's Information

Child's Name: (First/Middle/Last)

Date of Birth:

Sex of Child: Female Male

Hospital of Birth:

Place of Birth (City/County/State):

Requested name of Child (First/Middle/Last):

(Failure to identify a name on the above blank will cause the name on the birth certificate to be used)

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II. Father's Statement	
Father's Name:	
Date of Birth:	Mailing address:
Place of Birth:	
Social Security:	Residential Address:
Telephone No(s):	Current or Last Employer:
_____ (Initial) I have read and understand the statement of rights (on the reverse of this form) and I give up those rights.	I am the biological father o of: _____ (Child's Full Legal name)
_____ (initial) I accept my responsibility to provide child support.	_____ (initial) I hereby declare that the foregoing is true and correct to the best of my knowledge and belief, under penalty of perjury of the laws of Guam, this declaration being sworn and made in lieu of an affidavit pursuant to Title 6 Guam Code Annotated §4308, at the place and date of identified herein.
<p>_____ Signature of [<input type="checkbox"/>] Father [<input type="checkbox"/>] Legal Guardian of minor father</p> <p>_____ Signature of minor father (if applicable)</p> <p>Witness :</p>	

III. Mother's Statement	
Mother's Name:	
Date of Birth:	Mailing address:
Place of Birth:	
Social Security:	Residential Address:
Telephone No(s):	Current or Last Employer:
_____ (Initial) I have read and understand the statement of rights (on the reverse of this form) and I give up those rights.	I am the biological father o of: _____ (Child's Full Legal name)
_____ (initial) I accept my responsibility to provide child support.	_____ (initial) I hereby declare that the foregoing is true and correct to the best of my knowledge and belief, under penalty of perjury of the laws of Guam, this declaration being sworn and made in lieu of an affidavit pursuant to Title 6 Guam Code Annotated §4308, at the place and date of identified herein.
<p>_____ Signature of [<input type="checkbox"/>] Mother [<input type="checkbox"/>] Legal Guardian of minor mother</p> <p>_____ Signature of minor mother (if applicable)</p> <p>Witness :</p>	