



Biological Parent's Request to Add Consent/Contact Preference and/or Medical History Form(s)

Effective May 16, 2023, South Carolina Vital Records Law, Section 44-63-140 was amended to allow adult adoptees age 18 or older to obtain a copy of the adoptee's own original birth certificate along with any evidence of the adoption held with the original birth records if the biological parent has completed a form consenting to the release of the information. The form must also allow for the biological parent to indicate contact preference and the option to consent to release medical history information. A consent and contact preference form and/or medical history form may be provided to the adoptee if the biological parent has completed the form(s) and provided consent to release to the adoptee.

PROCEDURES AND INSTRUCTIONS

- Complete this application and the enclosed Consent, Contact Preference, and/or Medical History form.
- A \$12.00 "search fee" is required by SC Law Section 44-63-110 and a \$15 special filing fee is also applied for preparation and handling of the sealed adoption file. The fees for this request are non-refundable.
- Along with the completed application, be sure to include the payment and legible photocopy of a valid government issued picture identification.
- If we locate the original birth certificate, we will place the Consent, Contact Preference, and/or Medical History form in the "sealed file" with the original birth certificate and send you a letter stating that we did so.
- The Contact Preference Form is considered a private communication from the biological parent to the adoptee and no copies of the form will be given to anyone other than the adoptee.
- If we are unable to locate the original birth certificate, we will return the Consent, Contact Preference, and/or Medical History form to you with a letter stating we were unable to locate the record.
- Mail to: SC DPH – Vital Records
P.O. Box 2046
West Columbia, SC 29171
- The usual turnaround time for "mail" requests is approximately four (4) weeks from the date of receipt. If it has been more than 4 weeks since you submitted your request, call (803) 898-3630 or email VRRequestStatus@dph.sc.gov to determine the status.

APPLICANT SECTION (This Section Must Be Completed Legibly)

I request that you place the attached Contact Preference and Medical History with the original birth certificate of the adoptee and that this form be given to the adoptee if he/she requests a copy of his/her birth certificate.

Printed Name: _____ Phone Number: _____

Address: _____

City: _____ State: _____ Zip code: _____

Signature: _____ Date: _____

OFFICE USE ONLY SFN: _____

SC DEPARTMENT OF PUBLIC HEALTH

Vital Statistics

Biological Parent's Request to Add Consent/Contact Preference and/or Medical History Form(s) – 4022-ENG-DPH

PURPOSE: In accordance with South Carolina Law 44-63-140, a form must be established to “allow for the biological parent to indicate contact preference and to consent to release of medical history” for sealed original birth certificates in cases of adoptions.

AUDIENCE: A biological parent consenting to the release of the original birth certificate and/or any other documents contained in the sealed adoption file to the adoptee.

INSTRUCTIONS:

Instructions for completing each item are self-explanatory or embedded within the form. Applicants are instructed to complete each blank.

ADDITIONAL INFORMATION:

Identification – A valid/current government, school or employer issued photo identification document of the applicant is required before a search of the records will be conducted. Requests that do not contain proper identification will be returned unprocessed. Acceptable documents are:

- Any United States' DMV Office issued picture identification, i.e., Driver's License, ID card, Learner's Permit (unexpired)
- Current school or employer picture identification card
- Military card (unexpired, active duty or retired member)
- United States Passport (unexpired)
- Foreign Passport (unexpired)
- Re-Entry Permit (I-327, unexpired)
- Refugee Travel Document (form I-571, unexpired)
- United States Citizen Identification Card (form I-197)
- Temporary Resident Card (form I-688, unexpired)
- Permanent Resident Card (form I-551, unexpired)
- Weapon or gun permit issued by federal, state, or municipal government (unexpired)

Payment – Acceptable methods of payment for mail requests are money order or cashier's check made payable to SC DPH.

Website – Additional information can be obtained from the website <https://dph.sc.gov/public/vital-records> or by calling Vital Records at 1-803-898-3630.

OFFICE MECHANICS AND FILING: Completed forms will be maintained for three years then destroyed under retention schedule 17996.