To the Requestor:

When applying for a vital statistic record it is imperative that you legibly complete the appropriate areas of the request form in order for our office to process your request. For example, if you are requesting a copy of a marriage certificate you will have to complete the top section of the form as the “Requestor” with your current name, physical address, relationship to person of record, telephone number, application date and reason for the request.

Next, complete the box for the specific vital record you are requesting, (ie: birth, marriage, civil union, domestic partnership or death). Be sure to fully complete all appropriate areas which identify the desired record. Without a fully complete application, the Office of Vital Statistics is unable to process your request.

Please be sure to indicate the number of certificates you wish to obtain: Certified copies are $20.00 each and payment must be made by certified check or money order.

In addition to your completed vital record request form, please provide our office with a notarized copy of your current driver's license with the following phrase: "I swear/affirm that this is a true copy of my driver's license". The copy of your license MUST have the notary's seal on it. If it does not have the seal your documents will be returned to you and your request will not be processed.

Once the above steps have been completed please mail the items to:

The Borough of Glassboro
Registrar of Vital Statistics
1 South Main Street
Glassboro, NJ 08028

Should you have any questions or concerns please feel free to contact our office at (856)881-9230 ext.88199.

Sincerely,
Registrar of Vital Statistics
APPLICATION FOR A NON-GENEALOGICAL
CERTIFICATION OR CERTIFIED COPY OF VITAL RECORD

<table>
<thead>
<tr>
<th>Certified Copy</th>
<th>Requestor's Relationship to Person on Record</th>
<th>Requestor's Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>(proof is required for certified copy)</td>
<td></td>
</tr>
<tr>
<td>Date (of request)</td>
<td>/ /</td>
<td></td>
</tr>
</tbody>
</table>

Reasons for Request
- Passport
- Driver's License
- School / Sports
- Veterans' Benefits
- Social Security Card / Benefits
- Medicare
- Welfare / Disability
- Other:
  _______________________

Name of Requestor
First         Middle         Last

Current Mailing Address (must match address on ID)
Street
City         State         Zip Code

Email Address
@ .

Daytime Phone Number
{   } -

BIRTH
Child's Name at Birth
First         Middle         Last

No. Requested Copies

Place of Birth
City         State

County         Date of Birth / /

Name of Child's Parents (name given at birth or on birth certificate / Maiden Name)
Parent A
First         Middle         Last

Parent B
First         Middle         Last

If Child's name was changed:
New Name
Describe Change

MARRIAGE
No. Requested Copies

Place of Event
City         State

County         Date of Event / /

Name of Spouses (name given at birth or on birth certificate / Maiden Name)
Spouse A
First         Middle         Last

Spouse B
First         Middle         Last

DEATH
Name of Decedent
First         Middle         Last

No. Requested Copies

Place of Death
City         State

County         Date of Death / /

Name of Decedent's Parents (name given at birth or on birth certificate / Maiden Name)
Parent A
First         Middle         Last

Parent B
First         Middle         Last

Have you enclosed and completed all required information?
- Completed Application
- Proof of Relationship
- Payment
- Acceptable Forms of ID
- Mailing Address Matches ID

REG-37a
SEP 17

FOR STATE USE ONLY
Payment Type: Cash □ M/O □ Check □ Waived
Amount: $ □ ID Viewed □ Processed By:
INSTRUCTIONS FOR OBTAINING
A COPY OF NON-GENEALOGICAL VITAL RECORDS

- **Non-Genealogical Records** are births occurring within the last 80 years or if the individual is still living, marriages occurring within the last 50 years, deaths occurring within the last 40 years and all civil union and domestic partnership records.

- **Certified Copies** have the raised seal of the office issuing the record and are always issued on State of New Jersey safety paper. Certified copies may be used to establish identity and are legal documents.

- **Certifications** are issued on plain paper with no seal and clearly indicate they are not valid for establishing identity or for legal purposes. Certifications are generally useful for genealogy. Certifications of death records do not contain the Social Security Number or the Cause of Death medical terminology.

- **Apostille Seal** – An Apostille Seal is an additional seal required for certain certified records that will be presented to a foreign government that is a member of the Hague Treaty. The seal is often required on documents for international adoptions or establishing dual citizenship. Contact the consulate of the country involved to determine if you need an Apostille Seal.

  An Apostille Seal can only be obtained by first requesting certified copy of the vital record from the State Office of Vital Statistics and Registry. You would then forward this document to the New Jersey Department of Treasury, which issues the Apostille Seal. Additional information is available at: [http://www.state.nj.us/treasury/revenue/apostilles.shtml](http://www.state.nj.us/treasury/revenue/apostilles.shtml).

Applications for a certification or certified copy of a **Non-Genealogical** record require the applicant to provide a completed application, valid proof of identity¹, payment of the fee and, if requesting a certified copy, proof that establishes you are:
- the subject of the record;
- the subject's parent, legal guardian or legal representative;
- the subject's spouse/civil union partner, domestic partner, child, grandchild or sibling, if of legal age;
- a state or federal agency for official purposes; or
- requesting pursuant to a court order.

To request a certified copy of a Certificate of Birth Resulting in Stillbirth, use form REG-68, which is available on the New Jersey Department of Health website at: [http://nj.gov/health/vital/registration-vital/stillbirth/](http://nj.gov/health/vital/registration-vital/stillbirth/).

<table>
<thead>
<tr>
<th>Location Address:</th>
<th>Hours of Operation:</th>
</tr>
</thead>
</table>
| Borough of Glassboro  
Vital Statistics and Registry  
1 South Main Street  
Glassboro, NJ 08028 | 8:30 AM - 4:30PM  
Monday-Friday  
856-881-9230 Ext. 88199 |

<table>
<thead>
<tr>
<th>Mailing Address:</th>
<th>Fees:</th>
</tr>
</thead>
</table>
| Borough of Glassboro  
Vital Statistics and Registry  
1 South Main Street  
Glassboro, NJ 08028 | Certified Copies...........$20.00 |

¹ Valid photo driver’s license or photo non-driver’s license with current address OR valid driver’s license without photo and an alternate form of ID with current address OR two (2) alternate forms of ID, one of which must show the current address. Alternate forms of ID are: vehicle registration, vehicle insurance card, voter registration, US/foreign passport, permanent resident card (green card), Immigrant Visa, Federal/State ID, county ID, school ID, utility bill (within the previous 90 days), bank statement (within previous 90 days) or W-2 for current or previous year. Requests for records to be mailed to an address other than that which appears on the requestor’s ID must be accompanied by a notarized letter which includes A) the alternate address, and B) a request to mail records to this alternate address.