

FORM NO.1 **GOVERNMENT OF PUDUCHERRY**
KARAIKAL MUNICIPALITY
BIRTH REPORT
Legal information

This part to be added to the Birth Register

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In the case of multiple births, fill in a separate form for each child and write 'Twin birth' or 'Triple birth' etc., as the case may be, in the remarks column in the box below left.

FORM NO.1

<p><i>To be filled by the informant</i></p> <p>1. Date of Birth : (Enter the exact day, month and year the child was born e.g. 1-1-2000)</p> <p>2. Sex : (Enter "male", "female") do not use abbreviation)</p> <p>3. Name of the child, if any : (If not named, leave blank)</p> <p>4. Name of the father : (Full name as usually written) UID No of Father (if any) <input type="text"/></p> <p>5. Name of the mother : (Full name as usually written) UID No of Mother (if any) <input type="text"/></p> <p>6. Address of parents at the time of Birth of the Child</p> <p>7. Permanent address of parents:</p> <p>8. Place of birth : (Tick the appropriate entry 1 or 2 below and give the name of the Hospital/Institution or the address of the house where the birth took place)</p> <p>1. Hospital/Institution Name :</p> <p>2. House Address :</p> <p>9. Informant's name :</p> <p> Address :</p> <p><i>(After completing all columns 1 to 22, informant will put date and signature here :)</i></p>	<p style="writing-mode: vertical-rl; transform: rotate(180deg);">To be detached and sent for statistical processing</p>	<p><i>To be filled by the informant</i></p> <p>10. Town or Village of Residence of the mother : (Place where the mother usually lives. This can be different from the place where the delivery occurred. The house address is not required to be entered.)</p> <p>a) Name of Town/Village :</p> <p>b) Is it a town or village : (Tick the appropriate entry below) 1. Town 2. Village</p> <p>c) Name of District :</p> <p>d) Name of State :</p> <p>11. Religion of the Family : (Tick the appropriate entry below) 1.Hindu 2. Muslim 3.Christian</p> <p>12. 4. Any other religion :(write name of the religion)</p> <p>12. Father's level of education : (Enter the completed level of education e.g. if studied upto class VII but passed only class VI, write class VI)</p> <p>13. Mother's level of education : (Enter the completed level of education e.g. if studied upto class VII but passed only class VI, write class VI)</p> <p>14. Father's occupation : (If no occupation write 'Nil')</p> <p>15. Mother's occupation : (If no occupation write 'Nil')</p>	<p><i>To be filled by the informant</i></p> <p>16. Age of the mother (in completed years) at the time of marriage : (If married more than once, age at first marriage may be entered)</p> <p>17. Age of the mother (in completed years) at the time of this birth :</p> <p>18. Number of children born alive to the mother so far including this child : (Number of children born alive to include also those from earlier marriage(s), if any)</p> <p>19. Type of attention at delivery : (Tick the appropriate entry below)</p> <p>1. Institutional – Government</p> <p>2. Institutional– Private or Non-Government</p> <p>3. Doctor, Nurse or Trained midwife</p> <p>4. Traditional Birth Attendant</p> <p>5. Relatives or others</p> <p>20. Method of Delivery : (Tick the appropriate entry below)</p> <p>1. Natural</p> <p>2. Caesarean</p> <p>3. Forceps/Vacuum</p> <p>21. Birth Weight (in kgs.) (if available) :</p> <p>22. Duration of pregnancy (in weeks) :</p>
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FORM NO. 1
(See Rule 5)

Date:	Signature or left thumb mark of the informant	<i>(Columns to be filled are over. Now put signature at left)</i>	
<i>To be filled by the Registrar</i>		<i>To be filled by the Registrar</i>	
Registration No. : Registration Date : Registration Unit : Karaikal Municipality Town/Village : Karaikal District : Karaikal Remarks : (if any)		Name District : Karaikal Tahsil : Karaikal Town/Village : Karaikal Registration Unit : Karaikal Municipality	Code No. Registration No. : Registration Date : Date of Birth : Sex : 1.Male 2.Female Place of Birth : 1.Hospital/Institution 2.House
Name and Signature of the Registrar		Name and Signature of the Registrar	