

*Lisbon Exempted Village School District  
Office of the Superintendent  
317 North Market Street  
Lisbon, Ohio 44432*

Joseph E. Siefke  
Superintendent

Phone: 330-424-7714  
Fax: 330-424-0135

**INABILITY TO PROVIDE CERTIFIED BIRTH CERTIFICATE**

I, \_\_\_\_\_, thereby declare that I am unable to provide to the schools, within the required time, a certified birth certificate for the child named below, for the following reason(s):

---

---

---

---

In lieu of the required certified birth certificate, I am providing the following:

\_\_\_\_\_ Non certified birth certificate

\_\_\_\_\_ Certified baptismal record

\_\_\_\_\_ Certified hospital record

\_\_\_\_\_ Passport

\_\_\_\_\_ Birth affidavit (This must be signed by the attending physician and two (2) additional people with knowledge of the birth.)

\_\_\_\_\_  
Name of Child

\_\_\_\_\_  
Signature of Parent/legal Guardian