

**CRESTWOOD LOCAL SCHOOL DISTRICT**

**INABILITY TO PROVIDE BIRTH CERTIFICATE**

11260 Bowen Road, Mantua, Ohio 44255  
330-357-8207

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I, \_\_\_\_\_, hereby 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):

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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 persons with knowledge of the birth)*

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

\_\_\_\_\_  
Signature of Parent/Legal Guardian