D.P.H361		BIRTH REPORT	
Form NO.1 BIRTH REPORT LEGAL INFORMATION		SATISTICAL INFORMATION This part to be detached and sent for statistical	
This part to be added to the birth register		processing	
To be filled by the informant		9. Town or village of Residence of the mother	
1. DATE OF BIRTH		(Place where the mother usually lives. This	
	EX (Enter "male" or "female" do not	can be different from the place where the	
use abbreviations) 3. Name of the child if any: 4. (a) Name of the father (full name as usually written)		delivery occurred. The house address is not	
		required to be entered).	
		(a) Name of Two/village:	
(b	b) Name of the Grandfather:	(b) Is it appropriate entry below :	
5.(a	) Name and Age of the mother:		
	(full name as usually written)	5	
	whiten)	(c) Name of district:	
6. (a) Place of birth		(d) Name of state:	
(Tick the appropriate entry 1 or 2 below and give		10. Religion of the family:(Tick the appropriate	
the name of the Hospital/Institution or the		entry below )	
address of the house where the birth took place)		1. Hindu	
	(b) Order of Birth:	2. Muslim	
		3. Christian	
	(Living children only)	4. Sikh	
7.	Complete Residential Address:	5. Any other religion (write name of the religion)	
		11.Father's level of education	
		(Enter the completed level of education e.g. if	
_		studies upto class VII but passed only class VI.	
8.	Informant's name :	Write class VI)	
	Address:	12. Mother's level of education:	
	(After completing all columns 1 to 20	(Enter the completed level of education e.g. if	
	informant will put date and signature here).	studies upto class VII but passed only class VI.	
		Write class VI)	
		13.Father's Occupation:(If	
	Date : signature or left thumb	no occupation write 'NIL')	
	mark of the informant		

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 14. Mother's Occupation: (If no occupation write 'NIL') 15. Age of the mother (in complete years) at the time of marriage: \_\_\_\_\_ (If married more than once, age at first marriage may be entered 16. Age of the mother (in completed years) at the time of this birth: 17.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). 18.Type of attention at delivery: (Tick the appropriate entry/below) 1. Institutional – Government 2. Institutional – Private or non- Government 3. Doctor, Nurse or Trained midwife 4. Traditional Birth Attendant 5. Relatives or others 19. Method of Delivery: (Tick the appropriate entry below) 1. Natural 2. Caesaren 3. Forceps/Vacum 20. Birth Weight (in kgs.)if

21.Duration of pregnancy (in weeks):

available: