

**New York State
Department of Health
Bureau of Vital Records**

Notarized Affidavit of Gender Error

I, _____, being duly sworn, hereby depose and says:
(Print Your Name)

1. I submit this affidavit in connection with the Application for Correction of Certificate of Birth.
2. I believe that the gender assigned to me at birth was incorrect.
3. I am seeking to have my gender designation on my birth certificate corrected.
4. I have been living in my corrected gender immediately preceding this application.
5. I am not currently incarcerated, however, if I am I have submitted the required documentation regarding my criminal history.
6. I am not currently under community supervision, however, if I am I have submitted the required documentation regarding my criminal history.
7. I declare under penalty of perjury that the foregoing is true and correct.

| | |
|-------------------------|------|
| Signature | Date |
| | |
| Print or Type Your Name | |
| | |
| Title | |
| | |

| | |
|--------|------|
| Notary | Date |
| | |