## **Verifying Your Identity (Child Aged 17 or Younger)**

## We can verify your identity by reviewing your documents

NY State of Health needs to verify your identity to finish processing your application. You need to complete the form below and submit <u>copies</u> of the necessary documents. **Please do not send originals**. Once we verify your identity, we can finish processing your application.

If you submit a copy of a document from List A, it must have your photograph or a physical description of you, including information such as your name, age, sex, race, height, weight, and eye color. If you do not have a document from List A, you can send copies of **two** documents from List B. The information on both documents from List B must match.

If an applicant aged 18 or younger does not have documents from List A or B, a document from List C may be submitted.

Once you have completely filled out the form and collected copies of the documents listed below, you can:

Mail them to: NY State of Health, PO BOX 11727, Albany, NY 12211 OR

FAX them to: NY State of Health at 1-855-900-5557.

## **Identity Verification Form (Children 17 or Younger)**

1. Applicant Name (child aged 17 or younger)								
2. Address			3. City		4. State	5. ZIP Code		
6. Date of Birth (mm/dd/yyyy)			7. Social Security Number		8. Telephone Number			
Submit a <b>copy</b> of <b>ONE</b>	I OR I		one <u>copy</u> of <b>TWO</b>		Submit a <b>copy</b> of <b>ONE</b>			
document from List A	U.V.	documents from List B		- O.K	document from List C			
<ul> <li>U.S. Passport book or card</li> </ul>		• Birt	th certificate		A Hosi	nital or clinic record*		
<ul> <li>Foreign Passport book or</li> </ul>		Social Security card			<ul> <li>Hospital or clinic record*</li> <li>Doctor's record*</li> </ul>			
card		300	and Security card		2 200	tor s record		
<ul> <li>Driver's license</li> </ul>		Marriage certificate			Attestation of Identity Form			
					(DOH-5090)			
Official Government		• Div	orce decree					
Identification card			mlassau Idametifiaatian aand					
<ul><li>School Identification card</li><li>U.S. military card or draft</li></ul>			ployer Identification card h school diploma					
record		Tilg	ii school diploma					
Military dependent's		• Col	lege diploma					
Identification card								
Native American Tribal			h school equivalency					
Document			loma					
<ul> <li>U.S. Coast Guard Merchant Mariner card</li> </ul>		• Pro	perty deed or title					
Certificate of Naturalization								
(N-550 or N-570)								
Certificate of U.S. Citizenship     (N.550 and 1561)								
(N-560 or N-561) • Office of Refugee					*Annlies	to applicants 18 or		
Resettlement Verification of					younger			
Release Form						•		
Attestation. I attest, under penalty of perjury, that if I submit a document from List C, it is because I am								
unable to submit one document from List A or two documents from List B above to verify my identity (or the								
identity of my child) because I do not have access to the required documents. I attest, under penalty of perjury, that to the best of my knowledge the information in and submitted with this form is true and								
correct.								

perjury, that to the best of my knowledge the information in and submitted with this form is true and correct.

9. Signature of Parent or Guardian

10. Date (mm/dd/yyyy)

9. Signature of Parent or Guardian	10. Date (mm/dd/yyyy)
11. Name (type or print legibly)	12. Relationship

NEED HELP WITH THIS FORM? Call us at 1-855-355-5777. TTY users should call 1-800-662-1220 or 1-877-662-4886 for TTY in Spanish.