

## 2. BIRTH REGISTRATION

Applications can be made either in person or via mail.

### Application conditions:

1. Either mother or father must be Turkish citizen.
2. Child must be under 18
3. Birth must be in jurisdiction of Turkish Consulate General in New York (NY, NJ, DE, PA)

### Required documents:

1. Application forms (Encl.)
2. Original "Birth Certificate" of the child and a copy.
3. Turkish ID's of both parents and their copies.
4. If one of the parents is foreign national, passport and Turkish or English translation of "Birth Certificate". No need for translation of English documents. (Mandatory to have names of both mother and father in the Birth certificate)
5. Original "Marriage Certificate" and a copy.
6. A biometric photo, if your child is over 15
7. Petition for leaving the religion section blank. (Encl.)
8. Dual citizenship form (Encl.)
9. If you would like to have all documents you submitted returned to your postal address, pre-paid return envelope (with your address on and tracking number)

- **Notarized copies of original documents are also accepted for applications via mail.**

### Fee:

1. \$31 for mailing (for your documents to be mailed to Turkey)
2. \$11,46 for translation of dual citizenship form
3. \$10,20 for Turkish ID Card

### Application Method:

- For the child who was born in marriage unity, one of the parents can apply.
- If the child was born outside of marriage, both parents must apply in person.
- Please make an appointment on [www.konsolosluk.gov.tr](http://www.konsolosluk.gov.tr)

### Additional information:

Application fee can only be paid in cash or money order payable to the Turkish Consulate General in NY. Personal checks are not accepted.

**TO TURKISH CONSULATE GENERAL IN NEW YORK**

**I would like to register US-born child to Turkish census records.**

CHILD'S:	
Sex	<input type="checkbox"/> Female <input type="checkbox"/> Male
State of Birth	
Date of Birth (dd/mm/yyyy)	
Given Name	
Religion	
APPLICANT'S	
Relation to the child	<input type="checkbox"/> Mother <input type="checkbox"/> Father
Name	
Surname	
Residency Address:          Relatives you live with in the address:	
E-mail address	
Mobile phone	
Date	(dd/mm/yyyy)
Signature	

	DUAL CITIZENSHIP APPLICATION FORM		VAT FORM12 (ENGLISH)
<p style="text-align: center;"><b>TO TURKISH CONSULATE GENERAL IN NEW YORK</b></p> <p><b>I, hereby, would like to register dual citizenship of my US-born baby whose details are provided below, as per 5901 Law on Turkish Citizenship Act 44, since s/he can acquire US citizenship on birth.</b></p> <p><b>Date (dd.mm.yyyy):</b> <b>Signature:</b></p>			
THE US-BORN CHILD'S			
1. NAME AND SURNAME			
2. MOTHER'S NAME			
3.FATHER'S NAME			
4.PLACE OF BIRTH (STATE)			
5. DATE OF BIRTH (DD.MM.YYYY)			
6. MARITAL STATUS	SINGLE		
7. CITIZENSHIP	US	9. SEX	
8. DATE OF US-CITIZENSHIP (DD.MM.YYYY)		10.RELIGION	
11. ADDRESS OF RESIDENCY			
12. E-MAIL ADDRESS			

Date:...../...../2026

**TO TURKISH CONSULATE GENERAL IN NEW YORK**

I would like to have the religion section of my child left blank in Turkish census records.

Mother's		Father's	
Name and Surname		Name and Surname	
Signature		Signature	
Turkish ID number		Turkish ID number	