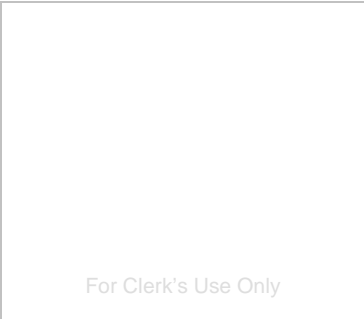


Person Filing: _____
Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
Lawyer's Bar Number: _____



Representing Self, without a Lawyer or Attorney for Petitioner OR Respondent

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of:

Case Number: CV _____

APPLICATION FOR CHANGE OF NAME FOR AN ADULT

Current Name of Applicant

(A.R.S. § 12-601)

INFORMATION ABOUT ME, THE APPLICANT

1. **BIRTH NAME:** on your original registered state Birth Record (Certificate):

First	Middle	Last

Date of Birth: _____

City of Birth: _____

County of Birth: _____

2. **CURRENT LEGAL NAME:**

First	Middle	Last

Current Address: _____

Current City of Residence: _____

Current State of Residence & Zip Code: _____

This is my married name, and that of my Current Spouse Past Spouse

3. OTHER NAMES: (Check all that Apply)

I was previously married –

- o From _____ to _____ and used the following name:
(Month, Year) (Month, Year)

First	Middle	Last

I was previously married –

- o From _____ to _____ and used the following name:
(Month, Year) (Month, Year)

First	Middle	Last

I changed my name – from this name: _____

- o When? _____ to _____ and used the following name:
(Month, Year) (Month, Year)

First	Middle	Last

I changed my name – from this name: _____

- o When? _____ to _____ and used the following name:
(Month, Year) (Month, Year)

First	Middle	Last

I have used the following alias: _____

- o When? _____ to _____ I used the following name:
(Month, Year) (Month, Year)

First	Middle	Last

I have used the following alias: _____

- o When? _____ to _____ I used the following name:
(Month, Year) (Month, Year)

First	Middle	Last

REQUESTS TO THE COURT

1. I ASK THAT MY NAME BE CHANGED TO:

First	Middle	Last

2. I ask that the birth records be ordered changed to reflect the new name requested above.

STATEMENTS TO THE COURT (REQUIRED BY ARIZONA LAW (A.R.S. § 12-601(C)))

Under Penalty of Perjury, I state the following as true:

(Check the boxes that indicate a true statement.) (For "4", *explain.*)

1. I submit this application solely for the benefit and in the best interests of the person for whom the name change is requested.
2. I understand and acknowledge that this change of name, if granted, will not release me from any obligations incurred or harm any rights of property or action in any previous name.
3. I am not knowingly requesting this change of name to that of another individual for the purpose of committing or furthering any offense of theft, forgery, fraud, perjury, organized crime or terrorism or any other offense involving false statements.
4. I request this name change because: (Explain)

5. Have you ever been convicted of a felony? Yes No

If "Yes," all felony convictions are listed below.

	Felony Case No.	County & State	Sentence	Date of Conviction
1				
2				
3				
4				
5				

Is there anything regarding your felony conviction(s) that you would like to bring to the Court's attention? (Optional)

6. Are there any criminal charges (*felony or misdemeanor*) pending against you at this time?

Yes No

If "Yes," all pending charges are listed below:

	Pending Charges	Name of Court or City & State	Case No.
1			
2			
3			
4			
5			

Is there anything regarding your pending criminal charges that you would like to bring to the Court's attention? (Optional)

UNDER OATH OR BY AFFIRMATION

I swear or affirm under penalty of perjury that the contents of this document are true and correct to the best of my knowledge and belief.

Date

Petitioner's Signature

Printed Name

STATE OF _____

COUNTY OF _____

Subscribed and sworn to or affirmed before me this: _____ by
(date)

_____.

(notary seal)

Deputy Clerk or Notary Public