
Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

Email Address (if any)

IN THE DISTRICT COURT FOR THE _____ JUDICIAL DISTRICT
FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF _____

IN RE: _____
Legal name of child

Case No. _____

UNREDACTED PETITION FOR NAME
CHANGE (Minor)

Fee Category: _____

Filing Fee: _____

Complete Section A, B, or C based on who is filing the petition.

I certify:

A. Both Parents are Filing the Petition Together

1. We are the parents of the above child, and are filing this petition together. Our full legal names and residences are:

Name: _____

Address: _____

Name: _____

Address: _____

B. Only One Parent Is Filing the Petition

1. I am a parent of the above child, and I am filing this petition without the other parent. My full legal name and residence are listed above.

2. ☐ a. The child's other parent is living; the other parent's name and address are:

Name: _____

Address: _____

☐ The address is unknown.

- ☐ b. The child's other parent is deceased.

C. A Guardian Is Filing the Petition

1. I am filing this petition as the guardian of the child. My full legal name and residence are listed above.

2. Child's Parents' Information

- a. The child's ☐ father ☐ mother is living, his/her name and address are:

Name: _____

Address: _____

☐ The address is unknown.

- b. The child's ☐ father ☐ mother is living, his/her name and address are:

Name: _____

Address: _____

☐ The address is unknown.

- c. ☐ The child's ☐ father ☐ mother is deceased.

3. ☐ Child's Grandparent's Information (if applicable)

Only list information about the child's grandparents if one of the following is true:

☐ I am a guardian, and one or both of the parents' addresses are unknown,

☐ I am a guardian, and both of the child's parents are deceased,

The name(s) and address(es) of the child's living grandparents are: _____

_____.

D. Child's Information

1. The child was born on (date) _____, _____, in the city of _____, county of _____, state of _____, and resides at _____.

2. The child's name should be changed to _____

The reason I want to change the child's name is: _____

3. The name change is not to avoid creditors or outstanding debts. The child is not required to register as a convicted sexual offender under Chapter 83, Title 18, Idaho Code, or under the provisions of similar laws enacted by another state.

4. I ask that a Deputy Clerk of the Court Issue a Notice of Hearing in this case to be published for four (4) successive weeks in (newspaper name) _____
Newspaper, designated by the court as most likely to give notice in: _____
County, the County where the child resides (visit <http://www.isc.idaho.gov/Name-Change-Publications> for a list of newspapers by county).

WHEREFORE, I ask that the Judge sign a Judgment changing the child's name as I have asked.

CERTIFICATION UNDER PENALTY OF PERJURY

I certify under penalty of perjury pursuant to the law of the State of Idaho that the foregoing is true and correct.

Date: _____

Typed/printed name

Signature