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 TH	E JUDICIAL DISTRICT	
FOR THE STATE OF IDAHO, IN AND FOR	THE COUNTY OF	
IN RE:	Case No.	
	UNREDACTED PETITION FOR NAME CHANGE (Minors)	
Legal names of children	Fee Category: Filing Fee:	
Complete Section A, B, or C based on who is	s filing the petition.	
I certify:		
A. Both Parents are Filing the Petition To	gether	
We are the parents of the above children, are names and residences are: Name:	nd are filing this petition together. Our full legal	
Address:		
Name:		
Address:		
B. Only One Parent Is Filing the Petition		
I am a parent of the above children, and I am	n filing this petition without the other parent. My	
full legal name and residence are listed abo		
2. \square a. The children's other parent is living; the	ne other parent's name and address are:	

	Name:				
	Address:				
	☐ The address is unknown.				
	☐ b. The children's other parent is deceased.				
C . <i>I</i>	C. A Guardian Is Filing the Petition				
1.	I am filing this petition as the guardian of the children. My full legal name and residence are listed above.				
2.	Children's Parents' Information				
	a. The children's \square father \square mother is living, his/her name and address are:				
	Name:				
	Address:				
	☐ The address is unknown.				
	b. The children's \square father \square mother is living, his/her name and address are:				
	Name:				
	Address:				
	☐ The address is unknown.				
	c. The children's father mother is deceased.				
3.	☐ Children's Grandparent's Information (if applicable)				
	Only list information about the children's grandparents if one of the following is true:				
	$\hfill \square$ I am a guardian, and one or both of the parents' addresses are unknown,				
	☐ I am a guardian, and both of the children's parents are deceased,				
	The name(s) and address(es) of the children's living grandparents are:				
					
D	. Children's Information				
1.	Children's information:				
	a. (name)was born on (date)				
	in the city of, county of,				
	state of and resides at				

	The child's name shoul	ld be changed to		
	b. (name)	name)was born on (date)		
		, county of		
	state of	and resides at		
		ld be changed to		
		was born on (date)		
		, county of		
	of	and resides at		
	The child's name shoul	ld be changed to		
2.	2. The reason I want to change the children's names is:			
3.	•	are not to avoid creditors or outstanding debter or register as a convicted sexual offender under		
	·	·	•	
4	 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 (1) associate weeks in (1). 			
4.				
	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 children reside (visit http://www.isc.idaho.gov/Name-			
		or a list of newspapers by county).	<u>.gov/ivame-</u>	
	Onange-r ublications ic	or a list of newspapers by country).		
	WHEREFORE, I ask that	at the Judge sign a Judgment changing the childr	en's names as I	
hav	e asked.			
	CERTI	IFICATION UNDER PENALTY OF PERJURY		
I cer	tify under penalty of per	rjury pursuant to the law of the State of Idaho tl	nat the foregoing is	
true	and correct.			
Date	e:			
Туре	ed/printed name	Signature		