

<b>STATE OF MICHIGAN</b> <b>JUDICIAL CIRCUIT - FAMILY DIVISION</b> <b>COUNTY</b>	<b>PETITION TO CHANGE NAME</b>	<b>FILE NO.</b>
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**Note:** Every person 22 years of age or older who is requesting a name change must have a criminal background check. For details, go to michiganlegalhelp.org.

In the matter of the name change of \_\_\_\_\_  
Present first name(s), middle name(s), and last name(s) (type or print)

1. An action within the jurisdiction of the family division of circuit court involving the family or family members of person(s) named above has/have been previously filed in \_\_\_\_\_ Court, Case Number \_\_\_\_\_, was assigned to Judge \_\_\_\_\_, and  remains  is no longer pending.

2. The name change is for

a. a married person who wishes to also include a name change for his/her  spouse.  minor child(ren), of whom the petitioner has legal custody. (For a minor 14 years or older, written consent is required. See form PC 51b.)

b. an adult.

c. a minor, whose natural or adopted parents are \_\_\_\_\_  Deceased  
Parent

and \_\_\_\_\_  Deceased  
Parent

Both parents are deceased. The guardian is \_\_\_\_\_ . (Attach letters of guardianship.)  
Name

3. The name change is for the following reason: \_\_\_\_\_

4. The name change is not sought for any fraudulent intent.

5. The following person(s) seeking a name change has/have a criminal record: \_\_\_\_\_

6. Each person for whom a name change is sought has been a resident of the county for at least one year.

**Note:** Skip item 7 if the noncustodial parent consents to the name change or if there is not a noncustodial parent.

7. I have legal custody of the minor.

a. The noncustodial parent has had the ability to visit, contact, or communicate with the child and has regularly and substantially failed or neglected to do so for a period of two years or more before the filing of this petition and either:

a support order has been entered, and the noncustodial parent has failed to substantially comply with the order for a period of two years or more before the filing of this petition; or

a support order has not been entered and the noncustodial parent, having the ability to support or assist in supporting the child, has failed or neglected to provide regular and substantial support for two years or more before the filing of this petition.

b. The noncustodial parent has been convicted of child abuse (MCL 750.136b), criminal sexual conduct (MCL 750.520b, 750.520c, 750.520d, or 750.520e), or assault with intent to commit criminal sexual conduct (MCL 750.520g) and the child or a sibling of the child was the victim. (Attach judgment of sentence.)

c. The last known address of the noncustodial parent is: \_\_\_\_\_

The noncustodial parent is not living at the above address, and I have taken the following steps to locate him/her: \_\_\_\_\_

(SEE SECOND PAGE)

Do not write below this line - For court use only

8. I request the following name change(s): (Type or print first name, middle name, and last name.)

FROM	TO	DATE OF BIRTH
Petitioner		month, day, year
Spouse		month, day, year
Minor child		month, day, year
Minor child		month, day, year
Minor child		month, day, year
Minor child		month, day, year

If you want a new live birth certificate, check item 9. A special order is not needed if you only want to add the changed name(s) to the original certificate(s).

9. I request the court to order the State Registrar to create a new live birth certificate that does not disclose the name of \_\_\_\_\_ at birth and to seal the original certificate.  
Name \_\_\_\_\_

I declare that this petition has been examined by me and that its contents are true to the best of my information, knowledge, and belief.

\_\_\_\_\_  
Date  
/s/  
Petitioner signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Name (type or print)

\_\_\_\_\_  
City, state, zip Telephone no.

**SIGNATURE OF PARENT/GUARDIAN FOR MINOR**

\_\_\_\_\_  
Date  
/s/  
Signature

\_\_\_\_\_  
Date  
/s/  
Signature

\_\_\_\_\_  
Name (type or print)

\_\_\_\_\_  
Name (type or print)

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, state, zip Telephone no.

\_\_\_\_\_  
City, state, zip Telephone no.

**CONSENT BY SPOUSE OF PETITIONER** If the petition is filed for a spouse, this consent must be signed by the spouse of the petitioner.

I am the spouse of the petitioner and consent to the granting of this petition to change my name.

\_\_\_\_\_  
Date  
/s/  
Signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Name (type or print)

\_\_\_\_\_  
City, state, zip Telephone no.

\_\_\_\_\_  
/s/  
Attorney signature

\_\_\_\_\_  
Address

\_\_\_\_\_  
Attorney name (type or print) Bar no.

\_\_\_\_\_  
City, state, zip Telephone no.