INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.982(a), PETITION FOR CHANGE OF NAME (ADULT) (06/10)

When should this form be used?

This form should be used when an adult wants the court to change his or her name. This form is **not** to be used in connection with a dissolution of marriage or for adoption of child(ren). If you want a change of name because of a <u>dissolution of marriage</u> or adoption of child(ren) that is not yet final, the change of name should be requested as part of that case.

This form should be typed or printed in black ink and must be signed before a <u>notary public</u> or <u>deputy</u> <u>clerk</u>. You should <u>file</u> the original with the <u>clerk of the circuit court</u> in the county where you live and keep a copy for your records

What should I do next?

Unless you are seeking to restore a former name, you must have fingerprints submitted for a state and national criminal records check. The fingerprints must be taken in a manner approved by the Department of Law Enforcement and must be submitted to the Department for a state and national criminal records check. You may not request a hearing on the petition until the clerk of court has received the results of your criminal history records check. The clerk of court can instruct you on the process for having the fingerprints taken and submitted, including information on law enforcement agencies or service providers authorized to submit fingerprints electronically to the Department of Law Enforcement. The process may take several weeks and you will have to pay for the cost of processing the fingerprints and conducting the state and national criminal history records check.

Next, you must obtain a <a hreating date for the court to consider your request. If you are seeking to restore a former name, a hearing on the petition MAY be held immediately after the petition is filed. The final hearing on any other petition for a name change may be held immediately after the clerk of court receives the results of your criminal history records check. You should ask the clerk of court, family law intake staff, or judicial assistant about the local procedure for setting a hearing. You may be required to attend the final hearing. Included in these forms is a Final Judgment of <a href="Name Change of Name (Adult), Florida Supreme Court Approved Family Law Form 12.982(b), which the judge may use. You should check with the clerk, family law intake staff, or judicial assistant, to see if you need to bring a final judgment form with you. If so, you should type or print the heading, including the circuit, county, case number, division, and the parties' names, and leave the rest blank for the judge to complete at your hearing or trial.

If the judge grants your <u>petition</u>, he or she will sign this <u>order</u>. This officially changes your name. The clerk can provide you with <u>certified copies</u> of the signed order. There will be charges for the certified copies, and the clerk can tell you the amount of the charges.

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Where can I look for more information?

Before proceeding, you should read General Information for Self-Represented Litigants found at the beginning of these forms. For further information, see Section 68.07, Florida Statutes.

Special notes...

The heading of the form calls for the name of the <u>petitioner</u>. Your current name should go there, as you are the one who is asking the court for something. The judicial circuit, case number, and division may be obtained from the clerk of court's office when you file the petition.

It may be helpful to compile a list of all of the people and/or places that will need a copy of your final judgment. This list may include the driver's license office, social security office, banks, schools, etc. A list will help you know how many copies of your order you should get from the clerk of court after your hearing.

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900 (a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE SECOND JUDICIAL CIRCUIT, IN AND FOR JEFFERSON COUNTY, FLORIDA

| | Case No.: Division: |
|-----|---|
| | |
| | Petitioner. |
| | PETITION FOR CHANGE OF NAME (ADULT) |
| fol | I, {full legal name}, being sworn, certify that the lowing information is true: |
| 1. | My complete present name is: |
| 2. | I live in County, Florida, at {street address} |
| 3. | I was born on {date}, in {city}, {county} |
| 4. | My father's full legal name : |
| 5. | I have lived in the following places since birth: Dates (to/from) Address |
| 6. | Family [Choose all that apply] a I am not married. b I am married. My spouse's full legal name is: c I do not have child(ren). d The name(s), age(s), and address(es) of my child(ren) are as follows (all children, including). |

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those over 18, must be listed):

| Name {last, first, mida | lle initial} | Age | Address, City, State | | |
|--|-----------------|----------------------|--------------------------------------|--|--|
| | | | | | |
| | hore if you a | re continuin | g these facts on an attached page.) | | |
| (Flease illulcati | e nere n you ar | re continuing | s these facts off an attached page. | | |
| Former names | | | | | |
| [Choose all that apply] | • | | | | |
| My name has never been changed by a court . | | | | | |
| | | | rder from | | |
| to | | | on <i>{date}</i> | | |
| by {court, city, and sta | te} | | | | |
| A copy of the court or | der is attached | d. | | | |
| My name previous | slv was change | d bv marria s | ge from | | |
| | | | on {date} | | |
| in {city, county, and st | ntel | | on <i>(adde)</i> | | |
| A copy of the marriag | | | | | |
| Were known or called by such name(s)} Occupation My occupation is: I am employed at: {company and address} | | | | | |
| During the past 5 years, I have had the following jobs: | | | | | |
| Dates (to/from) | | • | oyer's address | | |
| / | | | | | |
| | | | | | |
| | | | | | |
| (Please indica | te here if you | are continui | ng these facts on an attached page.) | | |
| Business | | | | | |
| [Choose one only] | | | | | |
| L do not own and operate a business. | | | | | |
| · | • | | the business is: | | |
| | | | | | |
| The street address is: | | | | | |
| | | | | | |
| I have been involved v | vith the busine | iss since: {da | te} | | |

| 10. | Profession | | | | | | | |
|-----|--|---|---|---|--|--|--|--|
| | [Choose one onl | y] | | | | | | |
| | I am not in a profession. | | | | | | | |
| | I am in a profession. My profession is: | | | | | | | |
| | I have practiced this profession: | | | | | | | |
| | Dates (to/from) Place and address | | | | | | | |
| | / | | 30 3114 334 335 | | | | | |
| | | | | _ | | | | |
| | | | | — | | | | |
| | | | | — | | | | |
| | | | | _ | | | | |
| | (Please in | ndicate here if y | ou are continuing these facts on an attached page.) | | | | | |
| 11 | Education | | | | | | | |
| 11. | Education I have graduated | from the follo | wing school(s): | | | | | |
| | Degree D | | | | | | | |
| | Received Gr | | School | | | | | |
| | Received Gi | aduation | 301001 | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | / Dloos | a indicate here | if you are continuing these facts on an attached page.) | | | | | |
| | (Pieas | e muicate nere | if you are continuing triese facts on an attached page. | | | | | |
| 1 2 | Criminal History | | | | | | | |
| 12. | Criminal History | | | | | | | |
| | [Choose one onl | • - | | | | | | |
| | | I have never been arrested for or charged with, pled guilty or nolo contendere to, or beer | | | | | | |
| | found to have committed a criminal offense, regardless of adjudication. | | | | | | | |
| | | I have a criminal history. In the past I have been arrested for or charged with, pled guilty or | | | | | | |
| | nolo contendere to, or been found to have committed a criminal offense, regardless of adjudication | | | | | | | |
| | The details of m | The details of my criminal history are: | | | | | | |
| | Date | City/State | Event (arrest, charge, plea, or adjudication) | | | | | |
| | Date | city, state | Event (arrest, charge, piea, or adjudication, | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | (Please | indicate here | f you are continuing these facts on an attached page.) | | | | | |
| | | | | | | | | |
| 13. | Bankruptcy | | | | | | | |
| | [Choose one only] | | | | | | | |
| | I have never been adjudicated bankrupt. | | | | | | | |
| | I was adjudicated bankrupt on {date}, in {city} | | | | | | | |
| | {county}, {state} | | | | | | | |
| | (Please indicate here if you have filed additional bankruptcies, and explain on an attached | | | | | | | |
| | page.) | • | | | | | | |
| | L~DC.T | | | | | | | |

| 14. | [Choose o | never had a mo | | nt entered against me by a creditor. udgment(s) have been entered against me | :: |
|-----|---------------------------|---|---------------------------|---|-----------------------|
| | Date | Amount | Creditor | Court entering judgment and case numb | per if Paid{date} |
| | I | Please indicate h | ere if these | facts are continued on an attached page. | |
| 15. | Fingerprin | ts and Criminal | History Rec | ords Check | |
| | approved history red | by the Departm cords check. I u | ent of Law nderstand t | er name, a copy of my fingerprints has been Enforcement and submitted for a state at hat I cannot request a hearing on my Perminal history records check. | and national criminal |
| 16. | | property rights | | or filing this petition, and granting it wil whether partnership, patent, good will, p | |
| 17. | My civil ri been fully | ~ | been susp | ended, or, if my civil rights have been su | uspended, they have |
| mo | | at the punishme | - | ing under oath to the truthfulness of the vingly making a false statement includes | |
| Dat | ted: | | | | |
| | | | | Signature of PETITIONER | |
| | | | | Printed Name: | |
| | | | | Address: | |
| | | | | City, State, Zip: | |
| | | | | Telephone Number: | |
| | | | | Fax Number | |

| STATE OF FLORIDA COUNTY OF | |
|---|---|
| Sworn to or affirmed and signed before me on | by |
| | NOTARY PUBLIC or DEPUTY CLERK |
| | [Print, type, or stamp commissioned name of notary o deputy clerk.] |
| Personally known | |
| Produced identification Type of identification produced | |
| IF A NONLAWYER HELPED YOU FILL OUT THIS Fall blanks] | FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [fill in |
| ।, {full legal name and trade name of nonlawyer | ·} |
| a nonlawyer, whose address is {street} | , {city}, |
| <i>{state}</i> , <i>{phone}</i> , helpe | ed {name}, who is |
| the petitioner, fill out this form. | |