Name				
Address				
City, State, Zip				
Phone				
Email				
	In the District	Court of Utah		
Judicial Distri			County	
Court Address				
In the Matter of the Name Change of:		Department of Corrections Certification Regarding Sex Offender and Child Abuse Offender Registries – Adult		
Petitioner		Case Number		
		Judge		
Petitioner's full name (first, middle and last		Date of Birth (MM/DD/YYYY)	Driver license / state ID number and state of issuance	
I certify that I search	ction to be completed by e	r Registry and Chil	d Abuse Offender	
<b>5</b> ,	vidual identified above a			
[ ] Negative – the abo	ve-named person is on the sove-named person is not on		ld abuse offender registry. e child abuse offender registry	
	Sign he	re <b>&gt;</b>		
Date Тур	ate Typed or Printed Name of Offender  Registration Program staff			

## Instructions

- (1) Complete the form. Leave the section that says "This section to be completed by Offender Registration Program staff" blank.
- (2) Address an envelope to yourself with your name and mailing address and put a stamp on it so that the completed form can be mailed back to you.
- (3) Mail the form and your self-addressed stamped envelope to:

## Offender Registration Program

14717 Minuteman Drive Draper, UT 84020

- (4) You must **mail** this form to the Offender Registration Program. They do not have an office open to the public.
- (5) The Offender Registration Program staff will fill out their section and will return the completed form to you using the envelope you provided.
- (6) Once the form is mailed back to you, file it with the court.