

\_\_\_\_\_  
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. \_\_\_\_\_

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.courtselfhelp.idaho.gov/name-changes> 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