

STATE OF VERMONT

SUPERIOR COURT

Unit

PROBATE DIVISION

Docket No.

In re:

PETITION TO CHANGE NAME OF MINOR

Part I. Request for Change of Name

The undersigned represents as follows:

That the minor's name is: _____

That the minor was born at _____ on _____
town/city/state *date of birth*

That the parents of the minor are:

Name: _____

Name: _____

Address: _____

Address: _____

That the guardian, if any, for the child was appointed by _____
and has the following name and address:

Name: _____

Address: _____

Name of court: _____

Address: _____

That my relationship to the child is:

☐ Parent

☐ Guardian

That the name I wish the minor to be known as is _____

I would like the minor's birth certificate changed: ☐ YES

☐ NO

That the reason for changing the minor's name is as follows:

I swear or affirm that the facts set forth in this petition are true and correct to the best of my knowledge and belief.

On: _____
Date
At: _____
City, County and State
Signature of Petitioner
Printed Name

Being over the age of 14, I consent to the name change: _____
Signature of Minor

Signed and sworn to before me:

Date	Signature of Notary Public	Expiration Date
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Part II. Consent

I, _____ whose relationship with the minor is that of
_____ consent to the change of name of the minor from
_____ to the new name of _____

At _____ on this _____ day of _____, 20_____

Signature

Printed Name

Mailing Address

Telephone/Email

Note: 15 V.S.A. § 812 states that the name of a minor if over fourteen years of age shall not be changed without this consent given in court.