

Name of Person Filing: _____
 Street Address: _____
 City, State, Zip Code: _____
 Telephone Number: _____
 Representing Self (No Attorney), or Represented by Attorney
 If Attorney, Bar Number: _____



For Clerk's Use Only

SUPERIOR COURT OF ARIZONA IN MARICOPA COUNTY

In the Matter of

Case Number: CV _____

APPLICATION FOR CHANGE OF NAME FOR AN ADULT (A.R.S. § 12-601)

 Current Name of Applicant

UNDER PENALTY OF PERJURY

1. INFORMATION ABOUT ME, THE APPLICANT:

Name on Birth Certificate: or Current Legal Name:

First	Middle	Last

Date of Birth: _____

Place of Birth: _____

County of Residence: _____

2. REQUESTS TO THE COURT:

I ask that my name be changed to:

First	Middle	Last

I ask that the birth records be ordered changed to reflect the new name listed above.

3. STATEMENTS TO THE COURT REQUIRED BY ARIZONA LAW (A.R.S. § 12-601(C))

(Check the boxes that indicate a true statement.) (For "d", *explain*.)

a. I submit this application solely for the benefit and in the best interests of the person for whom the name change is requested.

b. I understand and acknowledge that this change of name, if granted, will not release me from any obligations incurred or harm any rights of property or action in any previous name.

c. I am not knowingly requesting this change of name to that of another individual for the purpose of committing or furthering any offense of theft, forgery, fraud, perjury, organized crime or terrorism or any other offense involving false statements.

d. I request this name change because: (Explain) _____

e. Have you ever been convicted of a felony? Yes No

If "Yes" to "e", all felony convictions are listed below.

	Felony Case No.	County & State	Sentence	Date of Conviction
1				
2				
3				
4				
5				

Is there anything regarding your felony conviction(s) that you would like to bring to the Court's attention? (Optional) _____

f. Are there any criminal charges (*felony or misdemeanor*) pending against you at this time? Yes No

If "Yes" to "f", all pending charges are listed below:

	Pending Charges	Name of Court or City & State	Case No.
1			
2			
3			
4			
5			

Is there anything regarding your pending criminal charges that you would like to bring to the Court's attention? (Optional) _____

OATH OR AFFIRMATION OF APPLICANT

I affirm under penalty of perjury the information provided on this document is true and correct.

Signature

Date

Signed & Affirmed before me this date: _____ Date

(Seal/My Commission Expires)

Deputy Clerk or Notary Public