INSTRUCTIONS FOR COMPLETING AN APPLICATION FOR CHANGE OF NAME

GENERAL INSTRUCTIONS FOR BOTH ADULTS & MINORS

The law requires that you have been a resident of Medina County for sixty (60) days before you file your Application. In the case of a minor, the minor must be at least sixty days old. If you have not lived in Medina County for at least sixty days, your Application will be dismissed and your filing fees will not be refunded.

- 1. The Application, with all information must be typed or legibly printed in **ink**.
- 2. All requested information must be completed. Do not leave any lines blank!
- 3. Have you had a previous name change? If so and your birth certificate <u>does not</u> reflect this change, bring a certified copy of that name change when you file.
- 4. All names must be complete. Use middle names, where applicable, instead of middle initials.
- 5. You must bring a certified copy of your birth certificate issued within the past year when you file the Application.
- 6. File the completed forms with the Medina County Probate Court. The Probate Court is located on the first floor of the County Court House, which is located on the East side of Medina Square. Our mailing address is 225 E. Washington St., 4th Floor, Medina, Ohio 44256.
- 7. You must include the Initial Filing Fee of \$150 (Adult) or \$175 (Minor) with your application.
- 8. All applicants who are adults and minors 10 years of age or older for whom a name change application has been filed, must attend the hearing. Failure to attend the hearing will result in a denial of the name change application.

INSTRUCTIONS SPECIFICALLY FOR MINORS

- 1. A Recent Certified copy (within the past year) of the Birth Certificate is required.
- 2. <u>If publication is required</u>, a "Notice of Hearing on Change of Name" will be mailed to you. You must sign and return it to the Court so we can send it to the Medina Co. Gazette for publication. You must then call the Gazette to pay for the cost of publication. The notice must be in the newspaper once at least thirty (30) days before the hearing. Failure to properly publish the notice may result in the denial of your application.
- 3. After the newspaper publishes your notice, you will receive a Publisher's Affidavit (Proof of Publication) which you must mail or bring to the Court prior to your hearing.
- 4. If you are attempting to change the name of a minor, the parents of the minor, including an alleged father, must either consent to the name change, or be given proper legal notice of the hearing. The non-consenting parent or alleged father is entitled to notice regardless of the amount of contact with the child or the amount of child support paid or not paid.
- 5. In a minor name change, if a parent or alleged father does not consent, then the applicant must prove by clear and convincing evidence that the name of the minor should be changed. This may require witnesses and evidence to be presented at the hearing. If you have any questions as to how to present your case, you should consult with an attorney. The clerks at the Probate Court are not attorneys and therefore cannot give you legal advice.

Kevin W. Dunn, Judge

IN RE: The Name of:			
Case No.	· ·	Present Name)	
	TION FOR CHANGE O [R.C.2717.02, 2717.03, 2717.13		INOR
Applicant is the Parent	Legal Guardian 🔲 Legal (Custodian 🗌 Gı	uardian ad Litem of the minor.
The minor has been a bona fide restilling of this Application.	sident of Medina County, Ol	nio, for at least 60	days immediately prior to the
Applicant requests a change of nam to			
The reason for requesting this name			
A certified copy of the minor's birtle. The name and address of Parent 1			
Name			
Address			
City	State	Zip	
The Waiver of Notice of Heari	ng and Consent of Parent 1 acc	ompanies this Applic	cation.
Applicant states that the addre every reasonable effort to find		X X	ised all due diligence and made l.
The name and address of Parent	t 2 or the alleged father of	f the minor is:	
Name			
Address			
City	State	Zip	
The Waiver of Notice of Heari	ng and Consent of Parent 2 or t	he alleged father acc	companies this Application.
Applicant states that the address diligence and made every reason			Applicant has exercised all due locate this individual.
There is no person alleged to be	e the father/Parent 2 of the min-	or.	
A A CC: 1:4 : C .1 : A	1141		

An Affidavit in support of this Application is attached.

Case No.

Attorney for Applicant		Applicant's Signature				
Typed or Printed Name		Typed or Printed Name				
Address			Address			
City	State	Zip	City	State	Zip	
Telephone Number (including area code)		Telephone Number (including area code)				
Email Address			Email Address			
Attorney Registration	n No					

Kevin W. Dunn, Judge

IN	RE: The Name of:					
				(Present Name)		
Cas	se No.					
				Γ IN SUPPORT		
	\mathbf{A}	PPLICA			ME OF MINOR	
			[F	R.C.2717.06]		
Sta	te of Ohio, County o	of Medina,	SS.			
	e undersigned, in suj ifies all of the follow		ne Applicant's Appl	lication for Change	of Name of Minor, deposes, says and	
(1)	Applicant is the	parent	legal guardian	legal custodian	guardian ad litem of the minor;	
(2)	The minor has been prior to the filing of			edina County, Ohio	o, for at least sixty (60) days immediately	
(3)	The Application is	s not made	e for the purpose of	evading any credit	ors or other obligations;	
(4)	The minor has not been adjudicated a delinquent child for identity fraud;					
(5)					or R.C. 2950.041 because the minor was xually oriented offense or a child-victim	
(6)	Any other informa	ation relev	ant to the Applicat	ion		
(7)	All documentary e	evidence s	submitted with the	Application is true,	accurate and complete.	
(8)	City, County and	State of th	e minor's birth			
				Applicant's	Signature	
Swa	orn to before me and	d subscrib	oed in my presence	theday oj	<u> </u>	
				Notary Pub	plic	

IN RE: The Name of:	(Present Name)
	(Tresent Name)
Case No.	
WAIVER OF NOTICE	E OF HEARING AND
CONSENT TO CH	ANGE OF NAME
[R.C. 271	7.14(D)]
The undersigned, being a parent, legal custodian, or legal hearing on the Application to Change Name of Minor and	
	Signature
	Printed Name

Kevin W. Dunn, Judge

IN TH	IE MATTER OF:					
Case N	No					
	SELF-REPRESENTATION A	CKNOWLEDGE	MENT			
I ackno	owledge that I have read, understand and agree with al	l of the following stateme	nts:			
1.	The Court strongly recommended that I hire an attorn Court's recommendation, I have chosen to proceed with an attorney.	-		•		
2.	I have the time, knowledge and ability to handle all as from the Court or any other person.	spects of this case correct	y without ass	sistance		
3.	The Court and its Deputy Clerks are prohibited by law including without limitation determining what forms forms.					
4.	The Court and its Deputy Clerks cannot provide me v handle this case beyond the information on the Court'			properly		
5.	I am responsible for understanding and correctly appl Rules of Superintendence for the Courts of Ohio, Med and all other rules, regulations, policies and case law	ying those portion of the dina County Probate County	Ohio Revised			
6.			ns represente	d by		
7.	I have a duty to act fairly, honestly, impartially and in that may have an interest in this case. I also have a de- detrimental or harmful to others.		-			
	I may be personally liable to any person or entity that suffers financial damages as a result of anything I do in this case that does not comply with the legal requirements that apply to this case.					
9.	If I violate anything in this Self-Representation Acknowledge authority to proceed further with this case, or may recontinue with this case.					
		Applicant Signature				
	,	Typed or printed Name				
	-	Address				
	ī	City	State	Zip		

Phone Number (include area code)

E-mail Address