

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.982(f)

PETITION FOR CHANGE OF NAME (FAMILY) (09/16)

When should this form be used?

This form should be used when a family wants the court to change its name. This form is **not** to be used in connection with a **dissolution of marriage, paternity**, or adoption action. If you want a change of name because of a dissolution of marriage, paternity, or adoption action that is not yet final, the change of name should be requested as part of that case.

This form should be typed or printed in black ink and must be signed before a **notary public or deputy clerk**. You should **file** the original with the **clerk of the circuit court** in the county where you live and keep a copy for your records. The petition should only be completed for one adult. If you wish to change the name(s) of another adult and/or any child(ren), you should complete and file with the clerk of court the attached Supplemental Form(s) for Petition for Change of Name (Family) for each additional family member. **Be sure that the bottom of each page of each supplemental form is initialed.**

What should I do next?

Unless you are seeking to restore a former name, each adult petitioner must have fingerprints submitted for a state and national criminal history records check. The fingerprints must be taken in a manner approved by the Department of Law Enforcement and must be submitted to the Department for a state and national criminal history records check. **You may not request a hearing on the petition until the clerk of court has received the results of your criminal history records check.** The clerk of court can instruct you on the process for having the fingerprints taken and submitted, including information on law enforcement agencies or service providers authorized to submit finger prints electronically to the Department of Law Enforcement. The process may take several weeks and you will have to pay for the cost of processing the fingerprints and conducting the state and national criminal history records check. **Please note that the state and national criminal records check must indicate whether you have registered as either a sexual predator or a sexual offender and you must also indicate on this petition whether you have ever been required to register as a sexual predator under section 775.21, Florida Statutes, or as a sexual offender under section 943.0435, Florida Statutes.**

If any of the children for whom you are requesting this change of name are not the legal children of both adults filing this petition, you must obtain the consent of the legal parent(s). A parent not named as a **petitioner** in this action may consent by submitting a **Consent for Change of Name (Minor Child(ren))**, Florida Supreme Court Approved Family Law Form 12.982(d).

If the other parent does not consent to the change of name, you may still have a **hearing** on the **petition** if you have properly notified the other parent about your petition and the hearing. If you know where he or she lives, you must use **personal service**. If you absolutely do not know where he or she lives, you

may use constructive service. For more information about personal and constructive service, you should refer to the “**General Instructions for Self-Represented Litigants**” found at the beginning of these forms and the instructions to Florida Family Law Rules of Procedure Forms 12.910(a) and 12.913(b) and Florida Supreme Court Approved Family Law Form 12.913(a). The law on constructive service is very complex and you may wish to consult an attorney regarding constructive service.

Next, you must obtain a final hearing date for the court to consider your request. If you are seeking to restore a former name, hearing on the petition MAY be held immediately after the petition is filed. The final hearing on any other petition for a name change may be held immediately after the clerk of court receives the results of your criminal history records check. You should ask the clerk of court, family law intake staff, or judicial assistant about the local procedure for setting a hearing. You may be required to attend the hearing. Included in these forms is a **Final Judgment of Change of Name (Family)**, Florida Supreme Court Approved Family Law Form 12.982(g), which may be used when a judge grants a change of name for a family. If you attend the hearing, you should take the final judgment form with you. You should complete the top part of this form, including the circuit, county, case number, division, the name(s) of the petitioner(s) and leave the rest blank for the judge to complete. It should be typed or printed in black ink.

If the judge grants your petition, he or she will sign this order. This officially changes your family’s name. The clerk can provide you with certified copies of the signed order. There will be charges for the certified copies, and the clerk can tell you the amount of the charges.

Where can I look for more information?

Before proceeding, you should read “General Information for Self-Represented Litigants” found at the beginning of these forms. For further information, see section 68.07, Florida Statutes.

IMPORTANT INFORMATION REGARDING E-FILING

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic mail (e-mail) except in certain circumstances. **You must strictly comply with the format requirements set forth in the Rules of Judicial Administration.** If you elect to participate in electronic service, which means serving or receiving

pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you **must** review Florida Rule of Judicial Administration 2.516. You may find this rule at www.flcourts.org through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT REQUIRED TO DO SO. If a self-represented litigant elects to serve and receive documents by e-mail, the procedures must always be followed once the initial election is made.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please **CAREFULLY** read the rules and instructions for: **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914; **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915; and Florida Rule of Judicial Administration 2.516.

Special notes...

The heading of the form calls for the name(s) of the **petitioner(s)**. This is (are) the parent(s) who is/are requesting the change of their family's name(s). The judicial circuit, case number, and division may be obtained from the clerk of court's office when you file the petition.

It may be helpful to compile a list of all of the people and places that will need a copy of the final judgment. This list may include the driver's license office, social security office, banks, schools, etc. A list will help you know how many copies of your order you should get from the clerk of court after your hearing.

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____

Division: _____

IN RE: THE NAME CHANGE OF

_____,
Petitioner/Father,

_____,
Petitioner/Mother.

PETITION FOR CHANGE OF NAME (FAMILY)

I/We, {full legal name(s)} _____, being sworn,
certify that the following information is true:

There are {enter number} _____ adults named in this petition. A supplemental form is attached for each adult not set out below.

There are {enter number} _____ children named in this petition. I am/We are the birth or legal parents or guardian of the minor child(ren) named in this petition. I/We have attached a completed supplemental form for each minor child.

Unless I am/We are seeking to restore a former name, a copy of the fingerprints of each adult person seeking a name change in this petition has/have been taken in a manner approved by the Department of Law Enforcement, and submitted for a state and national criminal history records check. **I/We understand that I/we cannot request a hearing on my/our Petition until the clerk of court receives the results of the criminal history records check. I/We also understand that the state and national records check must indicate whether I/We have registered as either a sexual predator or sexual offender.**

THE FOLLOWING INFORMATION IS TRUE ABOUT PETITIONER:

_____ HUSBAND _____ WIFE _____ GUARDIAN

_____ **A Supplemental Form has been attached for the other parent or petitioner.**

1. My complete present name is:

I request that my name be changed to:

2. I live in _____ County, Florida, at {street address} _____

_____.

3. I was born on {date} _____, in {city} _____, {county} _____, {state} _____, {country} _____.

4. My father's full legal name: _____.
My mother's full legal name: _____.
My mother's maiden name: _____.

5. I have lived in the following places since birth:

Dates (to/from)	Address
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____

(____ Please indicate here if you are continuing these facts on an attached page.)

6. **Family**

[Indicate **all** that apply]

____ I am not married.

____ I am married. My spouse's full legal name is: _____.

____ I do not have child(ren).

____ The name(s), age(s), and address(es) of my child(ren) are as follows (all children, **including those over 18**, must be listed):

Name {last, first, middle initial}	Age	Address, City, State
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(____ Please indicate here if you are continuing these facts on an attached page.)

7. **Former names**

[Indicate **all** that apply]

____ My name has never been changed **by a court**.

____ My name previously was changed **by court order** from _____
to _____ on {date} _____,
by {court, city, and state} _____.
A copy of the court order is attached.

____ My name previously was changed **by marriage** from _____
to _____ on {date} _____,
in {city, county, and state} _____.
A copy of the marriage certificate is attached.

____ I have never been known or called by any other name.
____ I have been known or called by the following other name(s): {list name(s) and explain
where you were known or called by such name(s)} _____

_____.

8. Occupation

My occupation is: _____.
I am employed at: {company and address} _____
_____.

During the past 5 years, I have had the following jobs:

Dates (to/from)	Employer and employer's address
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____

(____ Please indicate here if you are continuing these facts on an attached page.)

9. Business

[Choose **one** only]
____ I do not own and operate a business.
____ I own and operate a business. The name of the business is: _____.
The street address is: _____.
My position with the business is: _____.
I have been involved with the business since: {date} _____.

10. Profession

[Choose **one** only]
____ I am not in a profession.
____ I am in a profession. My profession is: _____.

I have practiced this profession:

Dates (to/from) Place and address

(____ Please indicate here if you are continuing these facts on an attached page.)

11. Education

I have graduated from the following school(s):

Degree Received	Date of Graduation	School
-----------------	--------------------	--------

_____	_____	_____
_____	_____	_____
_____	_____	_____

(____ Please indicate here if you are continuing these facts on an attached page.)

12. Criminal History

[Indicate all that apply]

____ I have never been arrested for or charged with, pled guilty or nolo contendere to, or have been found to have committed a criminal offense, regardless of adjudication.

____ I have a criminal history. In the past I have been arrested for or charged with, pled guilty or nolo contendere to, or been found to have committed a criminal offense, regardless of adjudication. The details of my criminal history are:

Date	City/State	Event (arrest, charge, plea, or adjudication)
------	------------	---

(____ Please indicate here if you are continuing these facts on an attached page.)

I ____ have ____ have not ever been required to register as a sexual predator under section 775.21, Florida Statutes.

I ____ have ____ have not ever been required to register as a sexual offender under section 943.0435, Florida Statutes.

13. Bankruptcy

[Choose one only]

____ I have never been adjudicated bankrupt.

____ I was adjudicated bankrupt on {date} _____, in {city} _____,

{county} _____, {state} _____.

(____ Please indicate here if you have had additional bankruptcies, and explain on an attached page.)

14. **Creditor(s)' Judgments**

[Choose **one** only]

____ I have never had a money judgment entered against me by a creditor.

____ The following creditor(s)' money judgment(s) have been entered against me:

Date	Amount	Creditor	Court entering judgment and case number	{date} if Paid
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(____ Please indicate here if these facts are continued on an attached page.)

15. I have no ulterior or illegal purpose for filing this petition, and granting it will not in any manner invade the property rights of others, whether partnership, patent, good will, privacy, trademark, or otherwise.

16. My civil rights have never been suspended, or, if my civil rights have been suspended, they have been fully restored.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this petition and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

Signature of Petitioner
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____
Designated E-Mail Address(es): _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or clerk.]

_____ Personally known
_____ Produced identification
Type of identification produced _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:

[fill in **all** blanks] This form was prepared for the Petitioner(s).

This form was completed with the assistance of:

{name of individual} _____,

{name of business} _____,

{address} _____,

{city} _____, {state} _____, {zip code} _____, {telephone number} _____.

ADULT SUPPLEMENTAL FORM FOR PETITION FOR CHANGE OF NAME (FAMILY)

Case No.: _____

THE FOLLOWING INFORMATION IS TRUE ABOUT PETITIONER:

____ HUSBAND ____ WIFE ____ GUARDIAN

1. My complete present name is: _____

I request that my name be changed to: _____

2. I live in _____ County, Florida, at {street address} _____

3. I was born on {date} _____, in {city} _____, {county} _____, {state} _____, {country} _____

4. My father's full legal name: _____
My mother's full legal name: _____
My mother's maiden name: _____

5. I have lived in the following places since birth:

Dates (to/from)	Address
/	_____
/	_____
/	_____
/	_____
/	_____
/	_____
/	_____
/	_____
/	_____
/	_____

(____ Please indicate here if you are continuing these facts on an attached page.)

6. Family

[Indicate **all** that apply]

____ I am not married.

____ I am married. My spouse's full legal name is: _____

____ I do not have child(ren).

____ The name(s), age(s), and address(es) of my child(ren) are as follows (all children, **including those over 18**, must be listed):

Name <i>{last, first, middle initial}</i>	Age	Address, City, State
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

(____ Please indicate here if you are continuing these facts on an attached page.)

7. Former names

[Indicate all that apply]

____ My name has never been changed **by a court**.

____ My name previously was changed **by court** order from _____
to _____ on *{date}* _____
by *{court, city, and state}* _____.
A copy of the court order is attached.

____ My name previously was changed **by marriage** from _____
to _____ on *{date}* _____
in *{city, county, and state}* _____.
A copy of the marriage certificate is attached.

____ I have never been known or called by any other name.

____ I have been known or called by the following other name(s): *{list name(s) and explain where you were known or called by such name(s)}* _____

8. Occupation

My occupation is: _____.

I am employed at: *{company and address}* _____.

During the past 5 years, I have had the following jobs:

Dates (to/from)	Employer and employer's address
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____
____/____/____	_____

(____ Please indicate here if you are continuing these facts on an attached page.)

9. Business

[Indicate all that apply]

____ I do not own and operate a business.

____ I own and operate a business. The name of the business is: _____.

PETITIONER # _____, continued

The street address is: _____.

My position with the business is: _____.

I have been involved with the business since: {date} _____.

10. Profession

*[Indicate **all** that apply]*

____ I am not in a profession.

____ I am in a profession. My profession is: _____.

I have practiced this profession:

Dates (to/from)	Place and address
____/____	_____
____/____	_____
____/____	_____
____/____	_____
____/____	_____

(____ Please indicate here if you are continuing these facts on an attached page.)

11. Education

I have graduated from the following school(s):

Degree Received	Date of Graduation	School
____	____	_____
____	____	_____
____	____	_____

(____ Please indicate here if you are continuing these facts on an attached page.)

12. Criminal History

*[Indicate **all** that apply]*

____ I have never been arrested for or charged with, pled guilty or nolo contendere to, or been found to have committed a criminal offense, regardless of adjudication.

____ I have a criminal history. In the past I have been arrested for or charged with, pled guilty or nolo contendere to, or been found to have committed a criminal offense, regardless of adjudication. The details of my criminal history are:

Date	City/State	Event (arrest, charge, plea, or adjudication)
_____	_____	_____
_____	_____	_____
_____	_____	_____

(____ Please indicate here if you are continuing these facts on an attached page.)

I ____ have ____ have not ever been required to register as a sexual predator under section 775.21, Florida Statutes.

I ____ have ____ have not ever been required to register as a sexual offender under section 943.0435, Florida Statutes.

PETITIONER # _____, continued

13. Bankruptcy

[Choose **one** only]

____ I have never been adjudicated bankrupt.

____ I was adjudicated bankrupt on {date} _____, in {city} _____,
{county} _____, {state} _____.

(____ Please indicate here if you have had additional bankruptcies, and explain on an attached page.)

14. Creditors' Judgments

[Choose **one** only]

____ I have never had a money judgment entered against me by a creditor.

____ The following creditor(s)' money judgment(s) have been entered against me:

Date	Amount	Creditor	Court entering judgment and case number	{date} if Paid
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

(____ Please indicate here if these facts are continued on an attached page.)

15. I have no ulterior or illegal purpose for filing this petition, and granting it will not in any manner invade the property rights of others, whether partnership, patent, good will, privacy, trademark, or otherwise.

16. My civil rights have never been suspended, or, if my civil rights have been suspended, they have been fully restored.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this petition and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

Signature of Petitioner
Printed Name: _____
Address: _____
City, State, Zip: _____
Telephone Number: _____
Fax Number: _____
Designated E-Mail Address(es): _____

STATE OF FLORIDA
COUNTY OF _____

Sworn to or affirmed and signed before me on _____ by _____

NOTARY PUBLIC or DEPUTY CLERK

[Print, type, or stamp commissioned name of notary or clerk.]

____ Personally known
____ Produced identification
Type of identification produced _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:

[fill in **all** blanks] This form was prepared for the Petitioner(s).

This form was completed with the assistance of:

{name of individual} _____,
{name of business} _____,
{address} _____,
{city} _____, {state} _____, {zip code} _____, {telephone number} _____.

CHILD SUPPLEMENTAL FORM FOR PETITION FOR CHANGE OF NAME (FAMILY)

Case No.: _____

THE FOLLOWING INFORMATION IS TRUE ABOUT MINOR CHILD # _____:

1. Minor child's complete present name is:

I/We request that minor child's name be changed to:

2. The minor child lives in _____ County, Florida, at {street address} _____.

3. The minor child was born on _____, in {city, county, state, country} _____.

4. The minor child's father's full legal name: _____.
The minor child's mother's full legal name: _____.
The minor child's mother's maiden name: _____.

5. The minor child has lived in the following places since birth:

Dates (to/from)	Address
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____
_____/_____/_____	_____

(____ Please indicate here if continuing these facts on an attached page.)

6. [Choose **one** only]
____ The minor child is not married
____ The minor child is married to: {full legal name} _____.

7. [Choose **one** only]
____ The minor child has no children.
____ The minor child is the parent of the following child(ren): {enter name(s) and date(s) of birth} _____.

8. **Former names**
[Indicate **all** that apply]
____ The minor child's name has never been changed **by court order**.
____ The minor child's name previously was changed **by court order** from _____

to _____ on {date} _____ {court, city, and state} _____.

A copy of the court order is attached.

____ The minor child's name previously was changed by marriage from _____ to _____ on {date} _____ in {city, county, and state} _____.

A copy of the marriage certificate is attached.

____ The minor child has never been known or called by any other name.

____ The minor child has been known or called by the following other name(s): {list name(s) and explain where child was known or called by such name(s)} _____

_____.

9. The minor child is not employed in an occupation or profession, does not own and operate a business, and has received no educational degrees. If the minor child has a job, explain: _____

10. Criminal History

[Indicate all that apply]

____ The minor child has never been arrested for or charged with, pled guilty or nolo contendere to, or been found to have committed a criminal offense, regardless of adjudication.

____ The minor child has a criminal history. In the past, the minor child was arrested for or charged with, pled guilty or nolo contendere to, or been found to have committed a criminal offense, regardless of adjudication. The details of the criminal history are:

Date	City/State	Event (arrest, charge, plea, or adjudication)
------	------------	---

(____ Please indicate here if you are continuing these facts on an attached page.)

____ The minor child ____ has ____ has not ever been required to register as a sexual predator under section 775.21, Florida Statutes.

____ The minor child ____ has ____ has not ever been required to register as a sexual offender under section 943.0435, Florida Statutes.

11. Money Judgments

[Choose one only]

____ The minor child has never been adjudicated bankrupt, and no money judgment has ever been entered against him or her.

____ The following money judgment(s) has been entered against him or her:

Date Amount Creditor Court entering judgment and case number {date} if Paid

(____ Please indicate here if you are continuing these facts on an attached page.)