

Instructions for Name Change - Minor

(Packet contains: Civil Information Form - Petition - Consent- Order)

Read Directions Completely - Please Type or Print Neatly

Caution: Use of forms without the assistance of a lawyer could harm your legal rights. You may want to have a lawyer review your completed forms before you file them with the court. These are basic forms and may not cover every situation.

1. Complete the Civil Information Form. When selecting the nature of suite, mark the "Other Civil" box located in the civil section.
2. Complete the Petition except for the case and court numbers. Sign the Petition in front of a Notary. Fill out the Self Represented Litigant Certification Form.
3. Both parents must complete a Consent form - signed in front of a Notary.
4. File the original and 1 copy of the Petition and the Consent with the Clerk of the District Court (Civil Dept., 3rd Floor of the courthouse.) The filing fee is \$195.00.
5. Obtain case number and court division assignment from the Clerk of the District Court when you file.
6. Contact the Administrative Assistant for the court to which the case has been assigned, obtain a date and time for a hearing before the court and ask if the judge requires further notice to the other parent (publication, mail or both).
7. Give notice if required by the judge. Notice by publication requires you to publish notice of the hearing once a week for three weeks in one of the local papers that publishes legal notices. The paper may send a statement of publication directly to the court or to you. If it is sent to you be sure to bring it with you to the hearing for filing with the Clerk of the District Court. Notice by mail should be sent by registered mail - return receipt requested. Bring the return receipt with you to the hearing for filing with the Clerk of the District Court.
8. Complete the Order Changing Name for the judge's signature. Bring it along with proof of notice (see# 6) to the hearing.
9. Make copies of the signed Order (Social Security, etc. will need a file stamped copy of the Order.) File the Order with the Clerk of the District Court. The additional copies will be file stamped for no additional charge at that time.

Instrucciones para el Cambio de Nombre - Menor

(El paquete contiene: Hoja de Información Civil - Petición – Consentimiento - Orden)

Lea las instrucciones completamente – Por favor escriba o imprima

Precaución: El uso de las formas sin ayuda de un abogado podría dañar sus derechos legales. Es posible que desee que un abogado revise sus formas completas antes de presentarlas al tribunal. Estas formas son básicas y es posible que no cubran todas las situaciones.

1. Complete la Hoja de Información Civil. Al seleccionar la naturaleza de su caso, marque la caja “Otros Civiles” ubicada en la sección civil.
2. Complete la Petición a excepción del caso y los números de la corte. Firme la petición ante un notario. Llene la forma de certificación de litigante autónomo.
3. *Ambos pabres debe completar la forma de consentimiento, firmado ante un notario.*
4. Presente el original y una copia de la petición y el consentimiento ante la secretaria del Distrito Tribunal (Departamento Civil, 3er piso de la corte). El costo de la corte es de \$195.00.
5. Obtendrá un numero de caso y la asignación de la división judicial de la secretaria del Tribunal de Distrito cuando presente el caso.
6. Comuníquese con la asistente administrativa de la corte a la que se asignó el caso, obtenga una fecha y horario para una audiencia y pregunte si el juez requiere más notificación al otro padre (publicación, correo o amos).
7. Dar aviso so lo requiere el juez, Aviso por publicación requiere que publique el aviso de audiencia una vez a la semana durante tres semanas en uno de los periódicos locales que publica avisos legales. El periódico puede enviar una declaración de publicación directamente a la corte o a usted. Si se lo envían, asegúrese de llevarlo a la audiencia para presentarlo ante la secretaria del Tribunal de Distrito. El aviso por correo debe enviarse por correo certificado – se solicita acuse de recibo. Lleve el acuse de recibo a la audiencia para presentarlo ante la secretaria del Tribunal de Distrito.
8. Complete la Orden de Cambio de Nombre para la firma de juez. Traerlo junto con la prueba de notificación (ver #6) a la audiencia.
9. Haga copias de la Orden firmada (el Seguro Social, etc. Necesitara una copia de la orden sellada en el archivo). Presente la Orden ante la secretaria del Tribunal de Distrito. Las copias adicionales se sellaran en el archivo sin cargo adicional en ese momento.

CIVIL COVER SHEET

The civil cover sheet neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Clerk of the District Court for the purposes of initiating the civil docket sheet. **This information will not be available to the public and this document will be stored in a separate location from the case file and then destroyed within a reasonable time.** A new case **will not be accepted** without a cover sheet attached. (THIS FORM MUST BE TYPED OR PRINTED LEGIBLY). This form can be found at www.kscourts.org.

<u>NATURE OF SUIT</u> (Mark only one - If the case involves more than one of the following categories, indicate the category having the highest dollar value.)			
<u>CIVIL</u>		If a CH. 61: \$ _____ (Judgment Demand Amount)	
TORT WARRANT <input type="checkbox"/> Asbestos Product Liability <input type="checkbox"/> Automobile Tort <input type="checkbox"/> Intentional Tort <input type="checkbox"/> Legal Malpractice <input type="checkbox"/> Medical Malpractice <input type="checkbox"/> Other Professional Malpractice <input type="checkbox"/> Premises Liability <input type="checkbox"/> Slander/Libel/Defamation <input type="checkbox"/> Tobacco Product Liability <input type="checkbox"/> Toxic/Other Product Liability <input type="checkbox"/> Other Tort	CONTRACT <input type="checkbox"/> Buyer Plaintiff <input type="checkbox"/> Employment Dispute – Discrimination <input type="checkbox"/> Employment Dispute - Other <input type="checkbox"/> Fraud <input type="checkbox"/> Landlord/Tenant - Unlawful Detainer <input type="checkbox"/> Landlord/Tenant Dispute – Other <input type="checkbox"/> Seller Plaintiff (debt collection) <input type="checkbox"/> Other Contract CIVIL APPEALS <input type="checkbox"/> Administrative Agency <input type="checkbox"/> Other Civil Appeal	REAL PROPERTY <input type="checkbox"/> Eminent Domain <input type="checkbox"/> Mortgage Foreclosure <input type="checkbox"/> Other Real Property MISCELLANEOUS <input type="checkbox"/> 60-1507 <input type="checkbox"/> Habeas Corpus <input type="checkbox"/> Other Writs <input type="checkbox"/> OTHER CIVIL <input type="checkbox"/> SMALL CLAIMS	<input type="checkbox"/> STATE TAX
<u>DOMESTIC</u>			
<input type="checkbox"/> MARRIAGE DISSOLUTION/DIVORCE <input type="checkbox"/> PROTECTION FROM ABUSE <input type="checkbox"/> PROTECTION FROM STALKING <input type="checkbox"/> UIFSA <input type="checkbox"/> OTHER DOMESTIC RELATIONS <input type="checkbox"/> NON-DIVORCE SUPPORT, CUSTODY OR VISITATION <input type="checkbox"/> PATERNITY			
<u>PROBATE/ESTATE</u>			
GUARDIAN/CONSERVATOR <input type="checkbox"/> Conservatorship/Trusteeship <input type="checkbox"/> Guardianship - Adult <input type="checkbox"/> Guardianship - Minor <input type="checkbox"/> Guardian/Conservator - Adult <input type="checkbox"/> Guardian/Conservator – Minor	<input type="checkbox"/> DETERMINATION OF DESCENT <input type="checkbox"/> SEXUALLY VIOLENT PREDATOR <input type="checkbox"/> DECEDENT ESTATE CARE AND TREATMENT	<input type="checkbox"/> ELDER ABUSE <input type="checkbox"/> OTHER PROBATE/ESTATE	<input type="checkbox"/> ADOPTION

JURY DEMAND YES (Check yes only if jury demand is included in petition or as a separate pleading)
 NO

SUMMONS ATTACHED: YES
 NO

SERVICE BY: PROCESS SERVER/ATTORNEY
 SHERIFF IN STATE _____ (County)
 SHERIFF OUT OF STATE _____ (State)

SHERIFF'S PROCESS FEE ATTACHED YES
 NO

PLAINTIFF/SUBJECT INFORMATION
(ATTACH ADDITIONAL SHEET, IF NECESSARY)

NAME: _____

ADDRESS: _____

PHONE: _____ SEX: _____

CELL PHONE: _____

E-MAIL: _____

SSN: _____ DOB: _____

DL OR STATE ID NO: _____
State and Number

ALIAS NAMES USED: _____

ATTORNEYS

(Firm Name, Address, Telephone Number and
Supreme Court ID Number)

DEFENDANT/OTHER PARTY INFORMATION
(ATTACH ADDITIONAL SHEET, IF NECESSARY)

NAME: _____

ADDRESS: _____

PHONE: _____ SEX: _____

CELL PHONE: _____

E-MAIL: _____

SSN: _____ DOB: _____

DL OR STATE ID NO: _____
State and Number

ALIAS NAMES USED: _____

ATTORNEYS

(Firm Name, Address, Telephone Number and
Supreme Court ID Number)

**FOR DOMESTIC CASES - NAME, DATE OF BIRTH AND SOCIAL SECURITY NUMBER
OF EACH DEPENDENT CHILD:**

(Name)	(Date of Birth)	(Social Security Number)
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

The requirement that Social Security numbers be included on domestic cases is mandatory and authorized by the Supreme Court and federal law. On non-domestic cases, the Social Security number is not mandatory. The number is used for purposes of identification and may be disclosed as permitted by law. This form is not considered to be a public record.

Self-Represented Litigant Certification Form

By signing this form, I certify that, to the best of my knowledge, information, and belief, and based on my reasonable review of the document's contents, the attached filing complies with the certification requirements in the Temporary Rule for Filing in a District Court by a Self-Represented Litigant as follows:

(a) I have signed the attached filing and provided my name, address, email address (if available), telephone number, and fax number (if available); and

(b) The attached filing contains no personally identifiable information (PII) or meets an exception in the Temporary Rule for Filing in a District Court by a Self-Represented Litigant because the filing (check box that applies):

contains no PII (if this box is checked, do not check any other boxes); or

requests that this document be sealed under the Temporary Rule for Filing in a District Court by a Self-Represented Litigant for the following reason (check box that applies):

a pre-existing order was entered by the court on _____ that seals this document;

this document asks the court to issue an order that seals the following document: [include general description of document contents without including PII.] _____;

or this document asks the court to seal the following document already filed in the case: [describe the document already on file so that the clerk can identify it without using PII]

_____.

Date: _____

Signature: _____

Name of Party: _____

IN THE 29TH JUDICIAL DISTRICT
DISTRICT COURT WYANDOTTE COUNTY, KANSAS
CIVIL DEPARTMENT

In the Matter of the Petition of:

(Minor's name)

Case No. _____
Div. No. _____

by and through his/her next friend

(his her father mother)
To Change His Her Name.

Pursuant to Chapter 60 of K.S.A.

PETITION FOR CHANGE OF NAME (MINOR)

Petitioner, _____ (Minor), by and
through his her next friend _____
(Name), his her father mother, states:

1. Petitioner has been a resident of Kansas for more than sixty (60) days before filing this petition.
2. Petitioner's birth certificate shows his/her name as _____.
 His Her age is _____.
3. Petitioner desires to have his her legal name changed to _____.
4. The Petitioner desires the name change because _____
_____.
5. This Petition is not made for the purpose of avoiding any debts or obligations, nor will it result in prejudice to any person.
6. Petitioner's best interests and the best interests of the parents are served by the requested change in name.
7. Petitioner's natural mother/father consents to the requested name change. The consent is filed herein.

WHEREFORE, Petitioner prays this Court set this matter for hearing, order services by publication/certified mail, registered mail, or, if appropriate, waive any requirements for service; issue an order changing Petitioner's name from _____ to _____; and for such other further relief as the Court deems appropriate under the circumstances.

Respectfully submitted,

Petitioner's Next Friend:
Address: _____
City, State, Zip: _____
Telephone Number: _____

VERIFICATION

STATE OF KANSAS
COUNTY OF WYANDOTTE ss.

_____ [Next Friend's Name], of lawful age, being first duly sworn, on
his her oath, states:

He She is the Petitioner's Next Friend in the above-captioned matter; that he/she has read the above and foregoing Petition and the statements, allegations, and matters contained herein are true and correct.

SUBSCRIBED SWORN to before me on this _____ day of _____, 20____

Notary Public

My Appointment Expires: _____

Rev. 10/2009

IN THE 29TH JUDICIAL DISTRICT
DISTRICT COURT WYANDOTTE COUNTY, KANSAS
CIVIL DEPARTMENT

In the Matter of the Petition of:

(Name)
by and through His Her next friend

Case No. _____
Div. No. _____

(His Her Father Mother)
To Change His Her Name.

Pursuant to Chapter 60 of K.S.A.

CONSENT OF PARENT TO CHANGE NAME OF MINOR CHILD

I _____ (Name of Parent), state that I am the natural
(father/mother) of the minor child _____ (Name of Minor Child) a
(male female) child born in _____ (year of birth), in _____
(City, County, State).

I hereby consent to change the minor child's name from
_____ to _____ (Requested Name Change).

Name of Parent:
Address: _____
City, State, Zip: _____
Telephone Number: _____

STATE OF KANSAS
COUNTY OF WYANDOTTE ss.

VERIFICATION

Before me, a Notary Public, this ____ day of _____, 20____, personally
appeared _____, to me known to be the person
described in and who executed the foregoing, Consent of Parent to Change Name of
Minor Child; and further acknowledged that (he/she) executed the same as (his/her)
free act and deed.

IN WITNESS WHEREOF, I hereunto set my hand and affix my official seal on the
day and year last above written.

Notary Public

My Commission Expires: _____

IN THE 29TH JUDICIAL DISTRICT
DISTRICT COURT WYANDOTTE COUNTY, KANSAS
CIVIL DEPARTMENT

In the Matter of the Petition of:

(Name)
by and through His Her next friend

Case No. _____
Div. No. _____

(His Her Father Mother)
To Change His Her Name.

Pursuant to Chapter 60 of K.S.A.

CONSENT OF PARENT TO CHANGE NAME OF MINOR CHILD

I _____ (Name of Parent), state that I am the natural
(father/mother) of the minor child _____ (Name of Minor Child) a
(male female) child born in _____ (year of birth), in _____
(City, County, State).

I hereby consent to change the minor child's name from
_____ to _____ (Requested Name Change).

Name of Parent:
Address: _____
City, State, Zip: _____
Telephone Number: _____

STATE OF KANSAS
COUNTY OF WYANDOTTE ss.

VERIFICATION

Before me, a Notary Public, this ____ day of _____, 20____, personally
appeared _____, to me known to be the person
described in and who executed the foregoing, Consent of Parent to Change Name of
Minor Child; and further acknowledged that (he/she) executed the same as (his/her)
free act and deed.

IN WITNESS WHEREOF, I hereunto set my hand and affix my official seal on the
day and year last above written.

Notary Public

My Commission Expires: _____

THE FOLLOWING FORMS MUST BE FILLED OUT & FILED WITH THE CIVIL DEPARTMENT AFTER YOU HAVE CONTACTED THE JUDGES ADMINISTRATIVE ASSISTANT FOR A COURT DATE. PLEASE REFER TO #6, #7 & #8 OF YOUR INSTRUCTIONS OR AN ATTORNEY IF YOU HAVE ANY FURTHER QUESTIONS.

LAS SIGUIENTES FORMAS SE DEBEN LLENAR Y ARCHIVAR EN EL DEPARTAMENTO CIVIL DESPUES DE QUE SE HAYA CONTACTADO CON LA ASISTENTE ADMINISTRATIVA DE LOS JUECES PARA UNA FECHA DE AUDIENCIA. POR FAVOR REVISE #6, #7 Y #8 DE SUS INSTRUCCIONES O A CONSULTE A UN ABOGADO SI TIENE MAS PREGUNTAS.

IN THE 29TH JUDICIAL DISTRICT
DISTRICT COURT WYANDOTTE COUNTY, KANSAS
CIVIL DEPARTMENT

In the Matter of the Petition of:

(Name)
by and through his/her next friend

(his/her father/mother)
To Change His/Her Name.

ORDER CHANGING MINOR'S NAME

NOW, on this ____ day of _____, 20 ____,
the above-captioned matter comes before the Court upon the Petition of

(Petitioner's Full
Name), by and through his/her next friend _____
(Name), his/her father/mother, for change of his/her name.
Next friend appears in person. There are no other appearances.

The Court, after review of the record of the proceedings herein, approves service or waives any requirement for notice and determines the matter may proceed to hearing.

The Court, upon hearing the testimony, upon examining the evidence presented, and upon review of the record of the proceedings herein , finds as follows:

1. The Court has jurisdiction over the parties and the subject matter in this case.
2. Venue is appropriate in Wyandotte County, Kansas.
3. Service has been properly obtained on, or notice has been given to, all interested parties , or service and notice have been waived because there are no interested parties other than petitioner.
4. The allegations contained in Petitioner's Petition are true.
5. Petitioner _____ (Full Name) is now and has been a bona fide resident and citizen of Kansas, for a period of more than sixty (60) days immediately preceding the filing of the Petition.

6. Petitioner's birth certificate shows his/her name as _____
(Petitioner's Name).

His/her age is _____.

7. Petitioner seeks to change his/her legal name shown on
his/her birth certificate to _____
(Petitioner's Requested Name) because

_____.

8. The Petition for Order Changing Name is not made for the purpose of avoiding any
debts or obligations, nor is it made for the purpose of misleading or defrauding any
person. The requested name change will not result in prejudice to any person.

9. No objections have been made to the Court and the Court finds Petitioner is entitled to
have his/her legal name shown on his/her birth certificate changed to
_____(Petitioner's Requested Name).

IT IS THEREFORE BY THE COURT CONSIDERED, ORDERED, ADJUDGED,
AND DECREED that the above and foregoing findings are made as orders of this Court, that the
name shown on Petitioner's birth certificate of _____(Petitioner's
Full Name) is hereby ordered changed to _____
(Petitioner's Requested Name), and that the costs of this proceeding are assessed against
Petitioner.

IT IS SO ORDERED.

Judge of the District Court

SUBMITTED BY:

Petitioner's next friend
Address: _____
City, State, Zip: _____
Telephone Number: _____

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