

Cause Number: _____
(The Clerk's office will fill in the Cause Number and Court Number when you file this form.)

Name Change of:

In the _____
Court Number

District Court County Court at Law

Print current full legal name of person asking for name change. _____ County, Texas

Petition to Change the Name of an Adult

Print your answers.

1. Discovery Level

The discovery level in this case, if needed, is Level 1.

2. Petitioner

a. My current legal name is:

First Middle Last

b. I ask the Court to change my legal name to:

First Middle Last

c. The reason I want to change my name is:

3. Personal Information

My personal information is as follows:

a. Home address : _____
Street address

City County State ZIP code

b. Social Security Number: _____ Or I do not have a Social Security Number.

c. Date of birth: _____
Month Day Year

d. All drivers' license numbers issued to me during the last 10 years:

License number	State	License number	State
_____	_____	_____	_____
_____	_____	_____	_____

Or I have not had a driver's license during the last 10 years.

e. Place of birth: _____
city county state country

f. Sex listed on my birth certificate: Male Female

g. Race: _____

4. Criminal History

a. Have you ever been **charged** with a Class A or B misdemeanor or a felony? Yes No

If yes -- Write your FBI (Federal Bureau of Investigations) or SID (State Identification) number:

FBI Number _____ SID Number _____

List **all** Class A or B misdemeanors and felonies with which you have been charged, whether or not you were convicted. If you need more space, attach an additional page.

Offense	Case Number	County	Court Number	Court
_____	_____	_____	_____	<input type="checkbox"/> District Court <input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court <input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court <input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court <input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court <input type="checkbox"/> County Court

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

If yes -- The court **may** order your name changed if you were pardoned or at least two years have passed since you received a certificate of discharge or completed court ordered community supervision or juvenile probation, or if you are asking to change your name to the primary name used in your criminal history record. You must attach proof to this petition.

List all of your felony convictions here. If you need more space, attach an additional page.

Offense	Case Number	County	Court Number	Court
_____	_____	_____	_____	<input type="checkbox"/> District Court <input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court <input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court <input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court <input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court <input type="checkbox"/> County Court

c. Are you required to register as a sex offender? Yes No

If yes – You must attach proof that you notified the appropriate local law enforcement authority of your proposed name change.

5. Request for Judgment

I believe this name change is in my interest or benefit and in the interest of the public.
 I ask the Court to make an Order to change my name, and any other Orders I may be entitled to.

→ _____

Your Signature	Date		
_____	_____		
Your Printed Name	Phone		
_____	_____		
Mailing Address	City	State	Zip
_____	_____	_____	_____
Email Address: _____	Fax # (if any)	_____	
	_____	_____	

6. Verification (You must sign in front of a notary below.)

I swear under oath that the facts stated in this Petition to Change the Name of an Adult are true and correct.

→ _____
 Your Signature - Do NOT sign until you are in front of a notary!

Notary fills out below.

State of _____
(Print name of state where this Petition is notarized)

County of _____
(Print the name of the county where this Petition is notarized)

Sworn to and subscribed before me, the undersigned notary, on this date: _____ / _____ / _____

by _____
(Print name of person who is signing this Petition. NOT the notary's name.)

[Notary Stamps Here]

▴ _____
 Notary's Signature

You must attach these documents to your Petition:

- A legible and complete set of your **fingerprints** on a fingerprint card in a form acceptable to the Texas Department of Public Safety and Federal Bureau of Investigations. Write "**Exhibit**" at the top.
- If you were convicted of a felony and you were pardoned, attach proof of pardon for each conviction. Write "**Exhibit**" at the top.
- If you were convicted of a felony and it has been at least 2 years since you were discharged or completed probation or parole, attach proof that you were discharged or that you completed probation or parole for each conviction. Write "**Exhibit**" at the top.
- If you were convicted of a felony and are asking to change your name to the primary name used in your criminal history record information, attach a copy of your criminal history record.
- If you are required to register as a sex offender, attach proof that you notified the appropriate local law enforcement authority of your proposed name change. Write "**Exhibit**" at the top.

Cause Number: _____
Print court information exactly as it appears on Petition

Name Change of:

In the _____
Court Number

District Court County Court at Law

Print current full legal name of person asking for name change. _____ County, Texas

Order Changing the Name of an Adult

A hearing took place on: _____ .
Today's date

1. Appearances

The Petitioner appeared in person without an attorney.

2. Jurisdiction.

The Court finds that it has jurisdiction over this case and the Petitioner.

3. Record.

- A court reporter recorded today's hearing.
 A court reporter did not record today's hearing.

4. Findings

The Court finds that Petitioner's personal information is as follows:

a. Current legal name: _____
First Middle Last

b. Home Address: _____
Street address City County State ZIP code

c. Social Security Number: _____

Or Petitioner does not have a Social Security Number.

d. All driver's license numbers issued to Petitioner during the last 10 years:

Driver's License Number	State that Issued License
_____	_____
_____	_____
_____	_____
_____	_____

Or Petitioner has not had a driver's license during the last 10 years.

e. Date of birth: _____
Month Day Year

f. Place of birth: _____
City County State Country

g. Petitioner is: (Check one.) Male Female

h. Petitioner's race is: _____.

i. Petitioner: (Check one.)

does **not** have an FBI number or SID number.

has a Federal Bureau of Investigations (FBI) number, which is: _____.

has a State Identification (SID) number, which is: _____.

j. Petitioner: (Check one.)

has **not** been charged with a class A or B misdemeanor or felony.

has been charged with the following class A or B misdemeanors or felonies:

Offense (crime)	Case Number	County	Court Number	Court
_____	_____	_____	_____	<input type="checkbox"/> District Court
_____	_____	_____	_____	<input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court
_____	_____	_____	_____	<input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court
_____	_____	_____	_____	<input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court
_____	_____	_____	_____	<input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court
_____	_____	_____	_____	<input type="checkbox"/> County Court

k. Petitioner: (Check one.)

has **not** been convicted of a felony.

has been convicted of a felony and has been pardoned.

has been convicted of a felony and at least two years have passed since Petitioner received a certificate of discharge or completed court ordered community supervision or probation.

has been convicted of a felony and is changing their name to the primary name used in their criminal history record information.

l. Petitioner: (Check one.)

is **not** required to register as a sex offender.

is required to register as a sex offender and has submitted a Sex Offender Update Form to local law enforcement and provided proof to the Court of the submission.

m. The Petition to Change the Name of an Adult included a legible and complete copy of Petitioner's fingerprints.

n. Petitioner's change of name is in Petitioner's interest or benefit and is in the interest of the public.

5. Orders

The Court **ORDERS** that Petitioner's name is changed from:

Current name: _____
First Middle Last

to this name: _____
First Middle Last

6. Other Orders

The Court has the right to make other orders, if needed, to clarify or enforce this order. Any orders requested that do not appear above are denied.

SIGNED ON:

Date



Judge's Signature

NOTICE: THIS DOCUMENT CONTAINS SENSITIVE DATA.

Cause Number: _____
Print court information exactly as it appears on Petition

Name Change of: _____ In the _____
Court Number

District Court County Court at Law

_____ County, Texas
Print current full legal name of person asking for name change.

Affidavit for Prove-Up of Adult Name Change

I am above age 18.

I am fully competent to make this affidavit.

The facts stated in this affidavit are within my personal knowledge and are true and correct.

I am not asking the court to change my name to avoid criminal prosecution or to avoid payment of debt.

My current legal name is: _____
first middle last

My home address is: _____
street address city county state ZIP

(Check one.)

My Social Security Number is: _____

I do not have a Social Security Number.

(Check one.)

Below, I have listed all driver's license numbers issued to me during the last 10 years:

Driver's License Number	State that Issued License
_____	_____
_____	_____
_____	_____
_____	_____

I have not had a driver's license during the last 10 years.

My date of birth is: _____
month day year

My place of birth was _____
city county state country

My gender is: _____.

My race is: _____.

(Check all that apply.)

- I do **not** have an FBI number or SID number.
- My FBI (Federal Bureau of Investigations) number is: _____
- My SID (State Identification) number is: _____

(Check one.)

- I have **not** been charged with a class A or B misdemeanor or felony.
- I **have** been charged with the following class A or B misdemeanors or felonies:

Offense (crime)	Case Number	County	Court Number	Court
_____	_____	_____	_____	<input type="checkbox"/> District Court
_____	_____	_____	_____	<input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court
_____	_____	_____	_____	<input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court
_____	_____	_____	_____	<input type="checkbox"/> County Court
_____	_____	_____	_____	<input type="checkbox"/> District Court
_____	_____	_____	_____	<input type="checkbox"/> County Court

(Check all that apply.)

- I have **not** been convicted of a felony.
- I **have** been convicted of a felony and have been pardoned.
- I have been convicted of a felony and at least two years have passed since I received a certificate of discharge or completed court-ordered community supervision or probation.
- I **have** been convicted of a felony and am changing my name to the primary name used in my criminal history record information.

(Check one.)

- I am **not** required to register as a sex offender.
- I **am** required to register as a sex offender and I have submitted a Sex Offender Update Form to local law enforcement and provided proof to the Court of the submission.

My Petition to Change the Name of an Adult included a legible and complete copy of my fingerprints.

My change of name is in my interest or benefit and is in the interest of the public.

I am asking the court to change my name to: _____
_____.

WARNING: An affidavit is a statement made under oath. Lying under oath is a crime in Texas. See Texas Penal Code 37.02 and 37.03. Everything in this affidavit must be true and correct.

Verification (Party must sign in front of a notary below.)

I am the Petitioner, the person asking to change their name. I swear under oath that the facts stated in this Affidavit are true and correct.

Signature of Affiant (current legal name) **ONLY sign in front of a notary!**

Notary fills out below.

State of _____
(Print name of state where this affidavit is notarized)

County of _____
(Print the name of the county where this affidavit is notarized)

Sworn to and subscribed before me, the undersigned notary, on this date: ____ / ____ / ____

by _____
(Print name of person who is signing this affidavit. NOT the notary's name.)

[Notary Stamps Here]


Notary's Signature

NOTICE: THIS DOCUMENT CONTAINS SENSITIVE DATA



Cause Number: _____
(The Clerk's office will fill in the Cause Number when you file this form)

Plaintiff: _____
(Print first and last name of the person filing the lawsuit.)

And

In the _____ (check one):
Court _____
Number _____
 District Court
 County Court / County Court at Law
 Justice Court

Defendant: _____ Texas
(Print first and last name of the person being sued.) County _____

**Statement of Inability to Afford Payment of Court Costs
or an Appeal Bond in Justice Court**

1. Your Information

My full legal name is: _____ My date of birth is: ____ / ____ / ____
First Middle Last Month/Day/Year

My address is: (Home) _____
(Mailing) _____

My phone number: _____ My email: _____

About my **dependents**: "The people who depend on me financially are listed below.

<i>Name</i>	<i>Age</i>	<i>Relationship to Me</i>
1 _____	_____	_____
2 _____	_____	_____
3 _____	_____	_____
4 _____	_____	_____
5 _____	_____	_____
6 _____	_____	_____

2. Are you represented by Legal Aid?

I am being represented in this case for free by an attorney who works for a legal aid provider or who received my case through a legal aid provider. I have attached the certificate the legal aid provider gave me as 'Exhibit: Legal Aid Certificate.

-or-

I asked a legal-aid provider to represent me, and the provider determined that I am financially eligible for representation, but the provider could not take my case. I have attached documentation from legal aid stating this.

or-

I am not represented by legal aid. I did not apply for representation by legal aid.

3. Do you receive public benefits?

I do not receive needs-based public benefits. - or -

I receive these **public benefits/government entitlements** that are based on indigency:

(Check ALL boxes that apply and attach proof to this form, such as a copy of an eligibility form or check)

- Food stamps/SNAP TANF Medicaid CHIP SSI WIC AABD
- Public Housing or Section 8 Housing Low-Income Energy Assistance Emergency Assistance
- Telephone Lifeline Community Care via DADS LIS in Medicare ("Extra Help")
- Needs-based VA Pension Child Care Assistance under Child Care and Development Block Grant
- County Assistance, County Health Care, or General Assistance (GA)
- Other: _____

4. What is your monthly income and income sources?

"I get this monthly income:

\$ _____ in monthly wages. I work as a _____ for _____.
Your job title Your employer

\$ _____ in monthly unemployment. I have been unemployed since (date) _____.

\$ _____ in public benefits per month.

\$ _____ from other people in my household each month: (List only if other members contribute to your household income.)

\$ _____ from Retirement/Pension Tips, bonuses Disability Worker's Comp
 Social Security Military Housing Dividends, interest, royalties
 Child/spousal support
 My spouse's income or income from another member of my household (If available)

\$ _____ from other jobs/sources of income. (Describe) _____

\$ _____ is my **total monthly** income.

5. What is the value of your property?

"My property includes:	Value*
Cash	\$ _____
Bank accounts, other financial assets	\$ _____
_____	\$ _____
_____	\$ _____
Vehicles (cars, boats) <small>(make and year)</small>	\$ _____
_____	\$ _____
_____	\$ _____
Other property (like jewelry, stocks, land, another house, etc.)	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total value of property	→ \$ _____

6. What are your monthly expenses?

"My monthly expenses are:	Amount
Rent/house payments/maintenance	\$ _____
Food and household supplies	\$ _____
Utilities and telephone	\$ _____
Clothing and laundry	\$ _____
Medical and dental expenses	\$ _____
Insurance (life, health, auto, etc.)	\$ _____
School and child care	\$ _____
Transportation, auto repair, gas	\$ _____
Child / spousal support	\$ _____
Wages withheld by court order	\$ _____
Debt payments paid to: <small>(List)</small>	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total Monthly Expenses	→ \$ _____

*The value is the amount the item would sell for less the amount you still owe on it, if anything.

7. Are there debts or other facts explaining your financial situation?

"My debts include: (List debt and amount owed) _____

 _____"

(If you want the court to consider other facts, such as unusual medical expenses, family emergencies, etc., attach another page to this form labeled "Exhibit: Additional Supporting Facts.") Check here if you attach another page.


8. Declaration

I declare under penalty of perjury that the foregoing is true and correct. I further swear:

- I cannot afford to pay court costs.
- I cannot furnish an appeal bond or pay a cash deposit to appeal a justice court decision.

My name is _____ . My date of birth is : ____ / ____ / ____.

My address is _____
Street City State Zip Code Country

 _____ signed on ____ / ____ / ____ in _____ County, _____
Signature Month/Day/Year county name State