INTAKE FORM: MINOR NAME CHANGE (NY)

RINCKER LAW, PLLC

I. <u>BACKGROUND INFORMATION</u>

A. Parent Information

Name	
Address	
County	
DOB/ Age	
Phone	
Email	
Relationship to	
Child	

B. Child's Information

Legal Name	
Proposed Name	
Address	
County	
DOB/ Age	
Consent (if between	Does the Minor consent to the name change? Yes No
14 and 18 years of	
age)	
Relationship to	
Applicant	
Place of Birth	
(include County)	
Purpose of Request	

* <u>NOTE</u>: If the minor was born in the State of New York the following is required: a Birth Certificate, Certified Transcript of such Birth Certificate, or a Certification form the Commissioner of the local Board of Health that no such Certificate is available.

* <u>NOTE</u>: If the Minor is 18, he/she is no longer a Minor and will need to file an Adult Name Change Petition instead.

II. <u>ADDITIONAL INFORMATION</u>

A.	Have you previously made an application to change the Minor's name in any court? If so, please explain which court, when, and why: Yes No
B.	Please state the reason for this name change application:
C.	Please list the name of any other parent or anyone with parental rights:
D.	Was any parent's parental rights terminated? Yes No
E.	Please provide the parent's name whose rights were terminated and their last known address:
F.	Do you know where the other parent lives? Yes No
G.	Did the other parent consent to change the minor's name? Yes No
H.	What proof do you have of the other's parent's consent?
	Please attach any written documentation (e.g., emails, text messages, etc.)
I.	If there is not consent of the other parent, why is there no consent?
J.	Please indicate Yes or No to the following:
K.	Would the Minor's personal safety be jeopardized by the disclosure of this name change?YesNo
L.	Has the Minor been convicted of a crime?YesNo
M.	Has the Minor been adjudicated bankrupt?YesNo
N.	Are there judgment or liens of record again the Minor? Yes No
0.	Are/is there action(s) or proceeding(s) pending to which the minor is a party?

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