

Enter the name of the county in which this case was filed.

STATE OF WISCONSIN, CIRCUIT COURT,
_____ COUNTY

Enter **your current name**. You are the **Petitioner**.

IN THE MATTER OF THE NAME CHANGE OF

First Name Middle Name Last Name

The clerk will enter the case number.

Amended

**Petition for Name Change
for Adult or Minor 14 or Older
(30708)**

Case No. _____

In 1, enter your complete address.
In 2, enter the County where you live.

I am the Petitioner and state:

1. My address is [Street Address, City, State and Zip] _____.

2. I live in _____ County, Wisconsin.

In 3, enter the date and state of your birth.

3. I was born on [Date] _____ in the state of _____.

In 4, enter the state that the birth certificate was issued.

4. My birth certificate was issued in the state of _____.

In 5, enter name as it appears on the birth certificate.

5. The name that appears on my birth certificate is [First Name] _____
[Middle Name] _____
[Last Name] _____

In 6, enter your job title.

6. My current job is _____.

In 7, check a or b.

7. A. I do not work in a job for which a license has been required by any state, or my only professional license is to teach in the public schools in this state.

B. I do work in a job (other than a licensed teacher in Wisconsin public schools) for which a license has been required by any state. However, I have notified the state board or commission for my profession and they do not object to my proposed name change.

In 8, check the appropriate box.

8. I am am not a convicted sex offender required to register under §§301.45, 938.34(15m), and 938.345(3), Wis. Stats., or a similar law of any other state.

In 9, enter your proposed new name. Enter the reason(s) you want to change your name. Check 10, if you want your name changed on your WI birth and/or marriage certificate.

9. I wish to change my name to [First Name] _____
[Middle Name] _____
[Last Name] _____

For the following reason(s): _____

10. I wish to change the name on my Wisconsin birth marriage certificate.

I declare under the penalty of false swearing that the information I have provided is true and accurate.

Signature

Print or Type Name

Phone Number

Date