PROBATE COURT OF CLERMONT COUNTY, OHIO

IN RE: CHANGE OF NAME OF _____
(Present Name)

TO _____
(Name Requested)

CASE NO. _____

APPLICATION FOR CHANGE OF NAME OF MINOR

[R.C. 2717.01]

The applicant states that the applicant is the ☐ parent ☐ legal guardian ☐ guardian ad litem of the minor and that the minor has been a bona fide resident of Clermont County, Ohio, for at least one year immediately prior to the filing of this application.

A certified copy of the minor's birth certificate is attached.

☐ The applicant states that the name and address of the Parent 1 of the minor is:

_____
Name

_____
Address

_____
City State Zip

☐ and the name and address of ☐ Parent 2 or ☐ alleged father of the minor is:

_____
Name

_____
Address

_____
City State Zip

☐ Applicant states that the address of ☐ Parent 1 ☐ Parent 2 ☐ or alleged father is unknown and cannot with reasonable diligence be ascertained.

☐ There is no person alleged to be the father of said minor.

The applicant states that the person for whom a change of name is being requested
1) _____ ☐ has ☐ has (not) been convicted of, pleaded guilty to, or been adjudicated a delinquent child for identify fraud.
initials

2) _____ ☐ has a ☐ has (no) duty to comply with R.C. 2950.04 or R.C. 2950.041 because the applicant was convicted of, pleaded guilty to, or was adjudicated a delinquent child for having committed a sexually oriented offense or a child-victim oriented offense.
initials

[Reverse of Form 21.2]

CASE NO._____

☐ The applicant requests a change of name of the minor from_____
to _____
for the following reason: _____
_____
_____

The applicant states that the applicant will cause notice of the application to be published once in a newspaper of general circulation in this county at least thirty (30) days before the hearing on this application. In addition, notice will be given by the applicant to any non-consenting parent or alleged parent, whose addresses are known, by certified mail, return receipt requested.

_____	_____
Attorney for Applicant	Applicant's Signature
_____	_____
Typed or Printed Name	Typed or Printed Name
_____	_____
Address	Address
_____	_____
City State Zip	City State Zip
_____	_____
Telephone Number (include area code)	Telephone Number (include area code)

Attorney Registration No. _____

JOURNAL ENTRY SETTING HEARING AND ORDERING NOTICE

The Court orders this application set for hearing on the _____ day of _____,_____, at _____ o'clock ____.m. The applicant is ordered to cause notice of the application to be given by one publication in a newspaper of general circulation in this county at least thirty (30) days prior to the hearing date, as well as certified mail service, return receipt requested, if necessary, as required by law.

_____
Probate Judge

By: _____
Deputy Clerk