IN THE SUPERIOR COURT OF _____ COUNTY STATE OF GEORGIA FAMILY DIVISION

In re the Name Change of:

Petitioner:

Civil Action File No:_____

PETITION TO CHANGE NAME (OF AN ADULT)

Petitioner files this Petition To Change Name and Shows the following:

1. The following is the personal information about the Petitioner: Your current, full name: Your residential address: Your telephone number: ______ County and state of residence: ______ Date of birth (Petitioner must be at least 18 years old): Place of birth: _____ What do you want your name changed to? 2. I want to change my name to: 3. The reasons for the name change: Explain why you want to change your name: 4. This Petition is not submitted with the intention of defrauding another of any rights. 5. Today-s date:

Signature

COMMENT: As to allegations in a petition to change the name of a minor, see O.C.G.A. ' 19-12-1 and see Forms 650 through 690.

If you require materials in alternate format, please notify the Family Law Information Center as soon as possible.