

SUPERIOR COURT OF FULTON COUNTY
STATE OF GEORGIA

In re the Name Change of:

Civil Action

_____,
Petitioner.

Case Number _____

PETITION TO CHANGE NAME OF ADULT

My name is _____ and I am representing myself in this petition. In support of my case, I state the following:

1. I reside in FULTON County, Georgia. Therefore, jurisdiction and venue are proper in this Court.
2. I was born on _____:
[Check and complete only one of the following.]
___ (a) in _____ County, State of _____, U.S.A.
___ (b) outside the United States, in _____.
3. I want to change my name from _____ to _____.

4. *[Explain here why you want to change your name.]*

The reasons for this name change are as follows: _____

5. I do not intend to use this name change to fraudulently deprive anyone of any right under the law.

THEREFORE, I ask:

- (a) That my name be changed as provided in Paragraph 3 above;
- (b) That notice of this Petition be served as provided by law.

Dated: _____

Petitioner, Pro se (Signature)

Name: _____

Address: _____

Email: _____

**IF YOU DO NOT HAVE AN EMAIL ADDRESS, FILL OUT A
CERTIFICATE OF NO EMAIL ADDRESS**

Telephone No.: _____

SUPERIOR COURT OF FULTON COUNTY
STATE OF GEORGIA
FAMILY DIVISION

_____,
Petitioner,
v. _____,
Respondent.

Civil Action
Case Number

VERIFICATION

I, _____, personally appeared before the undersigned notary public and, being duly sworn, state that the facts stated in the foregoing Petition are true and correct.

This ____ day of _____, ____ (year)

Signature

Name: _____

Email: _____

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Telephone No.: _____

Sworn to before me this

____ day of _____, 20__.

Notary Public

General Civil and Domestic Relations Case Filing Information Form

☐ Superior or ☐ State Court of _____ County

For Clerk Use Only

Date Filed _____
MM-DD-YYYY

Case Number _____

Plaintiff(s)

Last First Middle I. Suffix Prefix

Last First Middle I. Suffix Prefix

Last First Middle I. Suffix Prefix

Last First Middle I. Suffix Prefix

Defendant(s)

Last First Middle I. Suffix Prefix

Last First Middle I. Suffix Prefix

Last First Middle I. Suffix Prefix

Last First Middle I. Suffix Prefix

Plaintiff's Attorney _____ State Bar Number _____ Self-Represented ☐

Check one case type and one sub-type in the same box (if a sub-type applies):

General Civil Cases

- ☐ Automobile Tort
- ☐ Civil Appeal
- ☐ Contempt/Modification/Other Post-Judgment
- ☐ Contract
- ☐ Garnishment
- ☐ General Tort
- ☐ Habeas Corpus
- ☐ Injunction/Mandamus/Other Writ
- ☐ Landlord/Tenant
- ☐ Medical Malpractice Tort
- ☐ Product Liability Tort
- ☐ Real Property
- ☐ Restraining Petition
- ☐ Other General Civil

Domestic Relations Cases

- ☐ Adoption
- ☐ Contempt
 - ☐ Non-payment of child support, medical support, or alimony
- ☐ Dissolution/Divorce/Separate Maintenance/Alimony
- ☐ Family Violence Petition
- ☐ Modification
 - ☐ Custody/Parenting Time/Visitation
- ☐ Paternity/Legitimation
- ☐ Support – IV-D
- ☐ Support – Private (non-IV-D)
- ☐ Other Domestic Relations

- ☐ Check if the action is related to another action pending or previously pending in this court involving some or all of the same: parties, subject matter, or factual issues. If so, provide a case number for each.

Case Number

Case Number

- ☐ I hereby certify that the documents in this filing, including attachments and exhibits, satisfy the requirements for redaction of personal or confidential information in OCGA § 9-11-7.1.

- ☐ Is a foreign language or sign-language interpreter needed in this case? If so, provide the language(s) required.

Language(s) Required

- ☐ Do you or your client need any disability accommodations? If so, please describe the accommodation request.

SUPERIOR COURT OF FULTON COUNTY

STATE OF GEORGIA

In re the Name Change of:

Civil Action

Case Number _____

Petitioner.

NOTICE OF PETITION TO CHANGE NAME OF ADULT

_____ filed a petition in the Superior Court of
Fulton County on _____, 20____, to change the name from: _____

_____ to _____

_____. Any interested party has the right to appear in this case and file
objections within 30 days after the *Petition* was filed.

Dated: _____

Petitioner, *Pro se* (Signature)

Name: _____

Address: _____

Email: _____

**IF YOU DO NOT HAVE AN EMAIL ADDRESS, FILL OUT A
CERTIFICATE OF NO EMAIL ADDRESS**

Phone (day): (_____) _____