

**INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW  
FORM 12.982(a)  
PETITION FOR CHANGE OF NAME (ADULT)  
(02/18)**

**When should this form be used?**

This form should be used when an adult wants the court to change his or her name. This form is **not** to be used in connection with a dissolution of marriage or for adoption of child(ren). If you want a change of name because of a **dissolution of marriage** or adoption of child(ren) that is not yet final, the change of name should be requested as part of that case.

This form should be typed or printed in black ink and must be signed before a **notary public** or **deputy clerk**. You should **file** the original with the **clerk of the circuit court** in the county where you live and keep a copy for your records.

**What should I do next?**

**Unless you are seeking to restore a former name, you must have fingerprints submitted for a state and national criminal records check.** The fingerprints must be taken in a manner approved by the Department of Law Enforcement and must be submitted to the Department for a state and national criminal records check. **You may not request a hearing on the petition until the clerk of court has received the results of your criminal history records check.** The clerk of court can instruct you on the process for having the fingerprints taken and submitted, including information on law enforcement agencies or service providers authorized to submit fingerprints electronically to the Department of Law Enforcement. The process may take several weeks and you will have to pay for the cost of processing the fingerprints and conducting the state and national criminal history records check. **Please note that the state and national criminal records check must indicate whether you have registered as a sexual predator or a sexual offender and you must also indicate on this petition whether you have ever been required to register as a sexual predator under section 775.21, Florida Statutes, or as a sexual offender under section 943.0435, F.S.**

Next, you must obtain a **hearing** date for the court to consider your request. If you are seeking to restore a former name, a hearing on the petition MAY be held immediately after the petition is filed. The final hearing on any other petition for a name change may be held immediately after the clerk of court receives the results of your criminal history records check. You should ask the clerk of court, **family law intake staff**, or **judicial assistant** about the local procedure for setting a hearing. You may be required to attend the **final hearing**. Included in these forms is a **Final Judgment of Change of Name (Adult)**, Florida Supreme Court Approved Family Law Form 12.982(b), which the **judge** may use. You should contact the clerk, family law intake staff, or judicial assistant, to see if you need to bring a **final judgment** form with you. If so, you should type or print the heading, including the circuit, county, case number, division, and the parties' names, and leave the rest blank for the judge to complete at your hearing or trial.

If the judge grants your **petition**, he or she will sign this **order**. This officially changes your name. The clerk can provide you with **certified copies** of the signed order. There will be charges for the certified

copies, and the clerk can tell you the amount of the charges.

### **Where can I look for more information?**

**Before proceeding, you should read General Information for Self-Represented Litigants found at the beginning of these forms.** For further information, see Section 68.07, Florida Statutes.

### **IMPORTANT INFORMATION REGARDING E-FILING**

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

### **IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION**

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic mail (e-mail) except in certain circumstances. **You must strictly comply with the format requirements set forth in the Rules of Judicial Administration.** If you elect to participate in electronic service, which means serving or receiving pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you **must** review Florida Rule of Judicial Administration 2.516. You may find this rule at [www.flcourts.org](http://www.flcourts.org) through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

**SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT REQUIRED TO DO SO.** If a self-represented litigant elects to serve and receive documents by e-mail, the procedures must always be followed once the initial election is made.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please **CAREFULLY** read the rules and instructions for: **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914; **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915; and Florida Rule of Judicial Administration 2.516.

### Special notes...

The heading of the form calls for the name of the **petitioner**. Your current name should go there, as you are the one who is asking the court for something. The judicial circuit, case number, and division may be obtained from the clerk of court's office when you file the petition.

It may be helpful to compile a list of all of the people and/or places that will need a copy of your final judgment. This list may include the driver's license office, social security office, banks, schools, etc. A list will help you know how many copies of your order you should get from the clerk of court after your hearing.

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900 (a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE \_\_\_\_\_ JUDICIAL CIRCUIT,  
IN AND FOR \_\_\_\_\_ COUNTY, FLORIDA

IN RE: THE NAME CHANGE OF

Case No.: \_\_\_\_\_

Division: \_\_\_\_\_

\_\_\_\_\_,  
Petitioner.

**PETITION FOR CHANGE OF NAME (ADULT)**

I, {full legal name} \_\_\_\_\_, being sworn, certify that the following information is true:

1. My complete present name is: \_\_\_\_\_  
I request that my name be changed to: Ryan

2. I live in \_\_\_\_\_ County, Florida, at {street address} \_\_\_\_\_  
\_\_\_\_\_

3. I was born on {date} \_\_\_\_\_, in {city} \_\_\_\_\_, {county} \_\_\_\_\_,  
{state} \_\_\_\_\_, {country} \_\_\_\_\_.

4. My parents' full legal names are :  
a. \_\_\_\_\_  
b. \_\_\_\_\_  
c. {If applicable }My parents' maiden name(s) is/are: \_\_\_\_\_  
and \_\_\_\_\_

5. I have lived in the following places since birth:

Dates (to/from)	Address
_____/_____ _____/_____ _____/_____ _____/_____	_____ _____ _____ _____

☐ Please indicate here if you are continuing these facts on an attached page.)

**6. Family**

[Indicate **all** that apply]

a. ☐ I am not married.

b. ☐ I am married. My spouse's full legal name is: \_\_\_\_\_

c. ☐ I do not have child(ren).

d. ☐ The name(s), age(s), and address(es) of my child(ren) are as follows (all children, **including those over 18**, must be listed):

Name {last, first, middle initial}	Age	Address, City, State
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

( ☐ Please indicate here if you are continuing these facts on an attached page.)

7. **Former names**

[Indicate **all** that apply]

a. ☐ My name has never been changed **by a court**.

b. ☐ My name previously was changed **by court order** from \_\_\_\_\_  
to \_\_\_\_\_ on {date} \_\_\_\_\_,  
by {court, city, and state} \_\_\_\_\_.  
**A copy of the court order is attached.**

c. ☐ My name previously was changed **by marriage** from \_\_\_\_\_  
to \_\_\_\_\_ on {date} \_\_\_\_\_,  
in {city, county, and state} \_\_\_\_\_.  
**A copy of the marriage certificate is attached.**

d. ☐ I have never been known or called by any other name.

e. ☐ I have been known or called by the following other name(s): {list name(s) and explain where you were known or called by such name(s)} \_\_\_\_\_  
\_\_\_\_\_

8. **Occupation**

My occupation is: \_\_\_\_\_.

I am employed at: {company and address} \_\_\_\_\_.

During the past 5 years, I have had the following jobs:

Dates (to/from)	Employer and employer's address
_____/_____ _____/_____	_____ _____

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

( ☐ Please indicate here if you are continuing these facts on an attached page.)

9. **Business** [Choose **one** only]

☐ I do not own and operate a business.

☐ I own and operate a business. The name of the business is: \_\_\_\_\_  
The street address is: \_\_\_\_\_

My position with the business is: \_\_\_\_\_

I have been involved with the business since: {date} \_\_\_\_\_

10. **Profession**

[Choose **one** only]

☐ I am not in a profession.

☐ I am in a profession. My profession is: \_\_\_\_\_  
I have practiced this profession:

Dates (to/from)	Place and address
_____ _____ _____ _____ _____	_____ _____ _____ _____ _____

( ☐ Please indicate here if you are continuing these facts on an attached page.)

11. **Education**

I have graduated from the following school(s):

Degree Received	Date of Graduation	School
_____ _____ _____ _____	_____ _____ _____ _____	_____ _____ _____ _____

( ☐ Please indicate here if you are continuing these facts on an attached page.)

12. **Criminal History**

*Indicate all that apply*

☐ I have never been arrested for or charged with, pled guilty or nolo contendere to, or been found to have committed a criminal offense, regardless of adjudication.

☐ I have a criminal history. In the past I have been arrested for or charged with, pled guilty or nolo contendere to, or been found to have committed a criminal offense, regardless of adjudication.  
The details of my criminal history are:

Date	City/State	Event (arrest, charge, plea, or adjudication)
_____	_____	_____
_____	_____	_____
_____	_____	_____

( ☐ Please indicate here if you are continuing these facts on an attached page.)

I ☐ have ☐ have not ever been required to register as a sexual predator under section 775.21, Florida Statutes.

I ☐ have ☐ have not ever been required to register as a sexual offender under section 943.0435, Florida Statutes.

### 13. Bankruptcy

[Choose **one** only]

☐ I have never been adjudicated bankrupt.

☐ I was adjudicated bankrupt on {date} \_\_\_\_\_, in {city} \_\_\_\_\_, {county} \_\_\_\_\_, {state} \_\_\_\_\_.

( ☐ Please indicate here if you have filed additional bankruptcies, and explain on an attached page.)

### 14. Creditor(s)' Judgments

[Choose **one** only]

☐ I have never had a money judgment entered against me by a creditor.

☐ The following creditor(s)' money judgment(s) have been entered against me:

Date	Amount	Creditor	Court entering judgment and case number	if Paid {date}
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

( ☐ Please indicate here if these facts are continued on an attached page.)

### 15. Fingerprints and Criminal History Records Check

Unless I am seeking to restore a former name, a copy of my fingerprints has been taken in a manner approved by the Department of Law Enforcement and submitted for a state and national criminal history records check. **I understand that I cannot request a hearing on my Petition until the Clerk of Court receives the results of the criminal history records check. I also understand that the state and national records check must indicate whether I have registered as either a sexual predator or sexual offender.**

16. I have no ulterior or illegal purpose for filing this petition, and granting it will not in any manner invade the property rights of others, whether partnership, patent, good will, privacy, trademark, or otherwise.

17. My civil rights have never been suspended, or, if my civil rights have been suspended, they have been fully restored.

**I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this petition and that the punishment for knowingly making a false statement includes fines and/or imprisonment.**

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature of PETITIONER

Printed Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Designated E-Mail Address(es): \_\_\_\_\_

\_\_\_\_\_

STATE OF FLORIDA

COUNTY OF \_\_\_\_\_

Sworn to or affirmed and signed before me on \_\_\_\_\_ by \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC or DEPUTY CLERK

\_\_\_\_\_  
*[Print, type, or stamp commissioned name of notary or deputy clerk.]*

\_\_\_\_\_ Personally known

\_\_\_\_\_ Produced identification

\_\_\_\_\_ Type of identification produced \_\_\_\_\_

**IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:**

[fill in **all** blanks] This form was prepared by the Petitioner.

This form was completed with the assistance of: \_\_\_\_\_

{name of individual} \_\_\_\_\_,

{name of business}: \_\_\_\_\_,

{address} \_\_\_\_\_,

{city} \_\_\_\_\_, {state} \_\_\_\_\_, {zip code} \_\_\_\_\_, {telephone number} \_\_\_\_\_.