



# Application for Change of Name of an Adult 16 Years of Age or Older

**IMPORTANT: The Application for Change of Name is not required if name change is due to marriage.  
You can assume your partner's surname by submitting your Marriage Certificate to places where you are changing your name.**

## Applicant Information

**1**

<b>Intent of Change</b>	Surname Only <input type="checkbox"/> Given Names Only <input type="checkbox"/> Both Surname and Given Name <input type="checkbox"/>  NOTE: A change of name will be reflected on the Registration of Birth if the event occurred in Newfoundland and Labrador (and within Canada in most cases). However, a change of name will only be reflected on the Registration of Marriage if requested.		
<b>Current Name (as shown on birth registration)</b>	Surname	Given Name	Middle Name(s) Female <input type="checkbox"/> X <input checked="" type="checkbox"/> Male <input type="checkbox"/>
<b>Proposed Name</b>	Surname Given Name <b>Ryan</b>		
<b>Date and Place of Birth</b>	Y Y Y Y M M D D	City / Town	Province / State Country
<b>Current Address and Telephone</b>	Street City / Town		
	Mailing Address (if different from above)		
	Province / State	Postal Code	Country

**2**

<b>Proof of Birth</b>	Original Birth Certificate (if born in Canada)  <input type="checkbox"/> If born in NL and have a Government issued Birth Certificate in your possession it must be returned with your application. <input type="checkbox"/> If born outside NL, but within Canada, a Government issued Birth Certificate is required. <input type="checkbox"/> If born outside Canada, certified copies of Immigration and/or Citizenship documents are required.  Birth Registration Number  Certified copy of Immigration and Citizenship Documents (if born outside Canada) Enclosed <input type="checkbox"/>
<b>Criminal Record Check</b>	As per section 10(2)(c.1) of the Change of Name Act, 2009, a criminal record check must be obtained and provided as part of your application. This record check can be obtained from the Royal Newfoundland Constabulary (RNC), Royal Canadian Mounted Police (RCMP) or another organization approved by the Minister of Digital Government and Service NL. The Minister has approved the Commissionaires to provide a criminal record check for purposes of a Change of Name application.  Please note, if a record check discloses that the applicant has been convicted of an offence listed in section 2(1)(f.1) of the Change of Name Act, 2009, the application will be provided to the Minister to determine whether to grant or refuse the change of name. Criminal Record Check Enclosed <input type="checkbox"/>

## Newfoundland and Labrador Gazette Publication

**3**

<b>Request for Exemption from Publication</b>	I hereby request an exemption, pursuant to Section 14(2) of the <b>Change of Name Act, 2009</b> to the requirement to publish the change of name in the Newfoundland and Labrador Gazette on the following ground(s):  <input type="checkbox"/> I would be unduly prejudiced or embarrassed by the publication. (Please provide reasons in a sealed envelope for Registrar's review) <input type="checkbox"/> The change of name applied for is of a minor effect. <input type="checkbox"/> I have been commonly known under the new name. (Please provide copy of IDs showing usage of new name)
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**Affidavit****4**

I understand that by making application for a change of name for myself, a notice of the change of name will be published in the Newfoundland and Labrador Gazette, unless a request for exemption has been approved. I acknowledge that this notice will consist of my former name(s), new name(s) and community.

**AFFIDAVIT OF GOOD FAITH****Applicant's  
Statutory  
Declaration**

I, \_\_\_\_\_  
Current Legal Name  
of \_\_\_\_\_

in the Province of Newfoundland and Labrador, DO SOLEMNLY SWEAR / AFFIRM:

1. That I am the applicant named in the above application which I make in good faith without intention to defraud, mislead or conceal my previous identity for an improper purpose.
2. That I have been ordinarily resident in the Province of Newfoundland and Labrador for at least three (3) months.
3. That I am aware that notice of my change of name may be provided to peace officers, as well as other public officers of departments and agencies of Government.
4. That I have read the application for a change of name and, to the best of my knowledge, information, and belief, the statements made therein are true in substance and in fact.

AND I MAKE THIS SOLEMN DECLARATION conscientiously believing it to be true, and knowing that it is of the same force and effect as if made under oath and by virtue of the **Canada Evidence Act**.

SWORN TO / AFFIRMED before me

Signature of Applicant

at \_\_\_\_\_  
in the \_\_\_\_\_ of \_\_\_\_\_  
this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

Commissioner of Oaths / Justice of the Peace / Notary Public with raised seal.  
If completed **outside** Newfoundland and Labrador, must be witnessed by Notary Public with raised seal.

**Request for Change of Name on Marriage Registration****5**

<b>Marital Status and Details</b>	Married <input type="checkbox"/>	Widowed <input type="checkbox"/>	Divorced <input type="checkbox"/>	Married Surname		
	Date of Marriage    Y Y Y Y    M M    D D	Place of Marriage City / Town		Province / State	Country	
<b>Proof of Marriage</b>	Provincial Marriage Certificate If married in NL and have a Government issued Marriage Certificate in your possession it must be returned with your application. You may apply for a new copy with a separate Marriage Certificate Application form. Enclosed <input type="checkbox"/> Request for Marriage Certificate attached <input type="checkbox"/> (if you were born in NL and do not have a Marriage Certificate)				Marriage Registration No.	
<b>Consent of Spouse</b>	I, _____ the spouse of the applicant hereby consent to the marriage registration being amended to reflect my spouse's new name.				Signature of Spouse	

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**6**

Please return completed form to Vital Statistics Division, Digital Government and Service NL, P. O. Box 8700, St. John's, NL Canada A1B 4J6. Telephone: (709) 729-3308.

**PRIVACY NOTICE**

The information on this form is collected under Section 10 of the authority of the **Change of Name Act, 2009** SNL 2009 c.C-8.1 and will be used to fulfill the requirements of the **Change of Name Act, 2009**. Any release of this information will be in compliance with **Change of Name Act, 2009** and the **Access to Information and Protection of Privacy Act**. If you have any question about the collection or use of this information, please contact a Vital Statistics representative at 709-729-3308.