

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF \_\_\_\_\_

**In the Matter of:**

**Case No:** \_\_\_\_\_

**PETITION FOR CHANGE OF**

☐ **NAME** ☐ **SEX**

\_\_\_\_\_  
Petitioner (*current name*)

*Adult*

I am the Petitioner. I am at least 18 years old or I have been emancipated by court order. I ask the court for a judgment (*check all that apply*):

☐ changing my name (*use complete names. First, Middle, Last*)

*from:* \_\_\_\_\_

*to:* \_\_\_\_\_//\_\_\_\_\_//\_\_\_\_\_

*First*

*Middle*

*Last*

☐ changing my legal sex

*to:* ☐ male ☐ female ☐ nonbinary

I have undergone surgical, hormonal, or other treatment appropriate to me for the purpose of affirming my gender identity

Public Interest (*check all that apply in Oregon or any other state*)

*For any boxes you mark, explain, including the state and case numbers if available*

☐ I owe child support arrears or am currently ordered to pay child support \_\_\_\_\_

☐ I have a protective order, stalking order, or restraining order in effect against me

☐ I am currently on probation, parole, or under post-prison supervision \_\_\_\_\_

☐ I am required to register as a sex offender \_\_\_\_\_

☐ I have formerly used the following names (*include all names you have used, whether legally or used by custom*)

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

☐ I ask that this record be SEALED by the court because: (*check all that apply*)

☐ I am a participant in the Address Confidentiality Program under ORS 192.826

☐ I am requesting a change of sex and I want the record to be sealed

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**I hereby declare that the above statements are true to the best of my knowledge and belief. I understand they are made for use as evidence in court and I am subject to penalty for perjury.**

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Date

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Signature

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Name (printed) (*current name*)

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Contact Address

City, State, ZIP

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Contact Phone

IN THE CIRCUIT COURT OF THE STATE OF OREGON  
FOR THE COUNTY OF \_\_\_\_\_

**In the Matter of:**

**Case No:** \_\_\_\_\_

\_\_\_\_\_  
Petitioner (*current name*)

**GENERAL JUDGMENT RE:**  
**CHANGE OF** ☐ **NAME** ☐ **SEX**  
*Adult*

*For court use only:*

- ☐ This record is ordered SEALED at Petitioner's request because:

  - ☐ Petitioner is a participant in the ORS 192.826 Address Confidentiality Program (ACP)
  - ☐ Petitioner has requested a change of sex and that the record be sealed

*or*

☐ Petitioner is a participant in the Address Confidentiality Program (ACP) and has requested a change of name only. The court finds good cause to not order the case record sealed (*explain*):

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**The court finds** that the requested identity record changes are not against the public interest

**The court orders**, based on the application by Petitioner, the following:

- ☐ Petitioner's name is changed: (*use complete names, First, Middle, Last*)

*from:* \_\_\_\_\_

*to:* \_\_\_\_\_//\_\_\_\_\_//\_\_\_\_\_

*First Middle Last*

- ☐ Petitioner's legal sex is changed to: ☐ male ☐ female ☐ nonbinary
- Petitioner has attested to undergoing surgical, hormonal, or other appropriate treatment for the purpose of affirming gender identity

Other: \_\_\_\_\_

*Judge Signature:*

\_\_\_\_\_  
**Certificate of Readiness per UTCR 5.100**

This judgment is ready for signature because it is submitted ex parte as allowed by statute  
Submitted by Petitioner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Name (printed)

\_\_\_\_\_  
Contact Address

\_\_\_\_\_  
City, State, ZIP

\_\_\_\_\_  
Contact Phone