

Using This Form

1. Copies
 - a. Original - to court.
 - b. Additional copies as dictated by local practice.
2. Prepared by person requesting a name change (applicant).
3. Attachments - none.
4. Preparation details –
 - a. This form can only be used for adults applying for a name change. It should not be used to apply to change the name of a minor. In the case of a minor, use CC-1427 - Application for Change of Name (Child).
 - b. The signature of the applicant must be acknowledged by a clerk, deputy clerk or notary public.
 - c. Data Elements 4-11 on page 2 of the form are completed by a clerk, deputy clerk or notary public.

APPLICATION FOR CHANGE OF NAME (ADULT)

COMMONWEALTH OF VIRGINIA VA. CODE § 8.01-217

VIRGINIA: In the Circuit Court of the [] City [] County of **1**

IN RE: **2**
(APPLICANT'S NAME) FIRST MIDDLE LAST SUFFIX

COMES NOW, the applicant, **3**

and after being duly sworn states under oath as follows:

1. Applicant's Birth Name: **4**
FIRST MIDDLE LAST SUFFIX

2. City or County of Residence: **5**

3. Residence Address: **6**
STREET ADDRESS

..... CITY STATE ZIP CODE COUNTRY

4. Mailing Address: **7**
IF DIFFERENT FROM RESIDENCE ADDRESS

5a. Date of Birth: **8** 5b. Place of Birth: **9**

6. Father's Full Name: **10**
FIRST MIDDLE LAST SUFFIX

7. Mother's Full Name: **11**
FIRST MIDDLE MAIDEN CURRENT LAST

Answer the following questions by checking appropriate "Yes" or "No" box and providing information as requested.

8. Have you ever been convicted of a felony? **12** [] Yes [] No

9. Are you currently incarcerated? ** **13** [] Yes [] No

If yes, indicate facility name:

Facility Location:

10. Are you a probationer with any court?*** **14** [] Yes [] No

If yes, indicate court name:

11. Have you previously changed your name either by a prior application or by marriage? **15** [] Yes [] No
(If yes, attach court order or other documentation and indicate previous names):
.....

**** Applications of probationers and incarcerated persons MAY be accepted if the Court finds good cause exists for such application. Attach explanatory documentation to the application**

DATA ELEMENTS for Page 1 of the form

1. Court name. Check the appropriate box to indicate county or city.
2. Style of case – insert name of applicant (person requesting a name change).
3. Name of applicant (person requesting a name change).
4. Full birth name of the applicant.
5. City or county where the applicant resides.
6. Address where the applicant resides. This should be a street address, not a post office box.
7. Mailing address, if different from the applicant’s street address.
8. Date of birth of the applicant.
9. Place of birth of the applicant.
10. Full name of the applicant’s father.
11. Full name of the applicant’s mother, including her maiden name.
12. Check the applicable box.
13. Check the applicable box. If “yes” is checked, provide the name of the facility and the location of the facility in which the applicant is currently incarcerated.
14. Check the applicable box. If “yes” is checked, provide the name of the court which placed applicant on probation
15. Check the applicable box. If “yes” is checked, provide documentation of the previous name change.

WHEREFORE, the undersigned applicant further certifies under oath that this name change is not sought for any fraudulent purposes and will not infringe upon the rights of others, and pursuant to § 8.01-217 of the Code of Virginia, 1950, as amended, the applicant requests that the Court order a change of name from:

1

.....
FIRST MIDDLE LAST SUFFIX
to

2

.....
FIRST MIDDLE LAST SUFFIX

3

APPLICANT

Commonwealth/State of **4**

[] City [] County of **5**

Subscribed and sworn to/affirmed before me this **6** day of, 20

by **7**

8
.....
DATE

9

[] CLERK [] DEPUTY CLERK
[] NOTARY PUBLIC My commission expires **10**

Registration No. **11**

DATA ELEMENTS for Page 2 of the form

1. Current name of the applicant.
2. New name that applicant is requesting the court to approve.
3. Signature of applicant.
4. State in which the signature of applicant is acknowledged.
5. Locality in which the signature of applicant is acknowledged.
6. Date application is signed and acknowledged by clerk, deputy clerk or notary public.
7. Print name of signatory.
8. Date application is signed and acknowledged by clerk, deputy clerk or notary public.
9. Signature of clerk, deputy clerk or notary public.
10. If acknowledged by notary public, enter expiration date of notary's commission.
11. If acknowledged by notary public, enter notary's registration number.