

Petition for Change of Name of Minor Child

Note: Fields marked with an asterisk (*) require *protected information*. You must file this form, a redacted copy of this form that abbreviates or masks the protected information, and a Protected Information Form.

In the Iowa District Court for _____ County

County where the case is filed

In re the Name Change of:

*

A minor child

Case no. _____

**Petition for Change of
Name of Minor Child**

If you need assistance to participate in court due to a disability, call the disability coordinator (information at www.iowacourts.gov/for-the-public/ada/). Persons who are hearing or speech impaired may call Relay Iowa TTY (1-800-735-2942). **Disability coordinators cannot provide legal advice.**

Iowa Code chapter 674

I (We), _____

as parent(s) of * _____, a minor child, for this Petition for Change of Name of Minor Child, state:

1. Check A, B, or C:

- A.** ☐ I am the sole parent qualified to act on behalf of the minor child and either the parental rights of the other parent have been terminated or there is no other legally established parent.
- B.** ☐ The other parent has not consented to the minor child's change of name.
- C.** ☐ We (both parents) consent to the minor child's change of name.

***2.** The minor child's present full name is _____

and the minor child resides in _____ County, Iowa.

***3.** The minor child's date of birth is _____

(month/day/year)

and the minor child is therefore: *Check either A or B*

A. ☐ Fourteen (14) years of age or older and the child's written consent is filed with this petition.

B. ☐ Under fourteen (14) years of age and: *Check one*

(1) ☐ All parents listed on the minor child's birth certificate consent to the minor child's change of name.

(2) ☐ The other parent has not provided consent. At the hearing, I will provide adequate proof that: *Check at least one*

(a) ☐ The nonconsenting parent has abandoned the minor child.

(b) ☐ The nonconsenting parent has been ordered to contribute to the support of the child or to financially aid in the child's birth and has failed to do so without good cause.

(c) ☐ The nonconsenting parent does not object to the name change after receiving due and proper notice.

4. The minor child is _____ feet, _____ inches tall; weighs _____ lbs.; has _____ color hair; and _____ color eyes.

5. The minor child is a _____ who
(race) (gender)
was born in _____ .
(place of birth)

*6. Petitioner(s) currently reside(s) at _____
and the minor child currently resides at _____

*7. Petitioner(s) and the minor child has (have) also resided at the following prior addresses during the past five years:

Petitioner(s):

Minor child:

8. I (We) request a change of name for the minor child for the following reasons:

9. A change of name for the minor child has not been previously requested pursuant to Iowa Code chapter 674.

10. Check either **A** or **B**:

*A. ☐ A certified copy of the minor child's birth certificate is filed with this petition.

B. ☐ A certified copy of the minor child's birth certificate is not available because (state reasons birth certificate is not available):

11. If the minor child's birth certificate is not available, petitioner(s) must file another form of identification in place of the certified copy of the birth certificate. Such other form of identification may include documents provided by United States Citizenship and Immigrations Services (USCIS).

12. I (We) request the court to enter an order changing the minor child's name:

*From (child's present full name): _____

*To (child's requested new name): _____

Continued on next page

13. Oath and signature

I (We) certify under penalty of perjury and pursuant to the laws of the State of Iowa that the preceding is true and correct.

Date

/s/ _____

Signature of parent

Printed name

Mailing address

Email address

Date

/s/ _____

Signature of parent

Printed name

Mailing address

Email address