



How to Ask the Court to Change a Name in the Chancery Division, Family Part

Superior Court of New Jersey

Who Should Use This Packet?

You can use this packet if you are filing for a name change in the Family Division. The types of name changes in the Family Division are:

- Changing the name of your minor child under the age of 18.
- Changing your name at the same time as requesting a name change of your minor child under the age of 18.

DO NOT use this packet:

- If you are an adult changing your name for reasons **other** than filing for a name change at the same time you file for your minor child, you should use the Civil Division packet - [10551 - How to Ask the Court to Change Your Name - Adults Only](#).
- If your name change is to resume your maiden name after a divorce, you must file a motion through your divorce docket. **Please note:** if your judgment of divorce stipulates that you may resume your maiden name, you do not need to use this packet and may apply for a new social security card free of charge with the Social Security Administration office.
- To correct a mistake on a birth certificate or marriage license (for example, incorrect or misspelled name or misstatement of gender), you should contact the **State Registrar of Vital Statistics** directly regarding these changes.

Note: This packet contains forms for both an adult and minor name change. While the forms may look similar, please be sure to use the proper forms when filing. If there is an active restraining order between you and the non-parent, you may contact the Family Court for further instructions.

Note: These materials have been prepared by the New Jersey Administrative Office of the Courts for use by self-represented litigants. The guides, instructions, and forms will be periodically updated as necessary to reflect current New Jersey statutes and court rules. The most recent version of the [forms](#) will be available at the county courthouse or on the Judiciary's Internet site njcourts.gov. However, you are ultimately responsible for the content of your court papers.

Completed forms are to be submitted to the county where you are filing your case. Applications can be submitted via Judiciary Electronic Document System (JEDS), the mail, or delivery. Documents will be filed as of the date they are received. A list of [Family Division Offices](#) is provided at the customer counter or at njcourts.gov.

Things to Think About Before You Represent Yourself in Court

Try to Get a Lawyer

The court system can be confusing, and it is a good idea to get a lawyer if you can. The law, the proofs necessary to present your case, and the procedural rules governing cases in the Family Division are complex. It is recommended that you make every effort to obtain the assistance of a lawyer. If you cannot afford a lawyer, you may contact the legal services program in your county to see if you qualify for free legal services. Their telephone number can be found online under “Legal Aid” or “[Legal Services](#).”

If you do not qualify for free legal services and need help in locating an attorney, you can contact the bar association in your county. Most county bar associations have a [Lawyer Referral Service](#). The County Bar Lawyer Referral Service can supply you with the names of attorneys in your area willing to handle your particular type of case and will sometimes consult with you at a reduced fee. There are also organizations of minority lawyers throughout New Jersey, as well as organizations of lawyers who handle specialized types of cases. Ask your county court staff for a list of lawyer referral services that include these organizations.

If you decide to proceed without an attorney, these materials explain the procedures that must be followed to have your papers properly filed and considered by the court.

What You Should Expect If You Represent Yourself

While you have the right to represent yourself in court, you should not expect special treatment, help or attention from the court. The following is a list of some things court staff can and cannot do for you. Please read it carefully before asking court staff for help.

- We *can* explain and answer questions about how the court works.
- We *can* tell you what the requirements are to have your case considered by the court.
- We *can* give you some information from your case file.
- We *can* provide you with samples of court forms that are available.
- We *can* provide you with guidance on how to fill out forms.
- We *can* usually answer questions about court deadlines.
- We *cannot* give you legal advice. Only your lawyer can give you legal advice.
- We *cannot* tell you whether or not you should bring your case to court.
- We *cannot* give you an opinion about what will happen if you bring your case to court.
- We *cannot* recommend a lawyer, but we can provide you with the telephone number of a local lawyer referral service.
- We *cannot* talk to the judge for you about what will happen in your case.
- We *cannot* let you talk to the judge outside of court.
- We *cannot* change an order issued by a judge.

Keep Copies of All Papers

Make and keep copies of all completed forms and documents related to your case.

Overview

The following is a brief overview of the process for filing for a name change by a court. There are three basic steps that you must take to file for a name change:

1. You must fill out forms to send to the court with a filing fee (even if you are changing the names of multiple family members, there is only one fee). The forms are contained in this packet and include a Verified Complaint, a Certification of Confidential Information for Name Change, an Order Fixing Date of Hearing, a Final Judgment, and a Final Judgment Addendum. (There are two copies of each form: one to be used for an adult and one to be used for a minor).

Please note: When filing for a name change a **separate form** must be submitted for **each party**. A separate docket number is assigned for each name change filed.

2. When the court returns the Verified Complaint, Certification of Confidential Information for Name Change and the Order Fixing Date of Hearing to you, the forms will contain a docket number. You must send the Order Fixing Date of Hearing to the Director of the Division of Criminal Justice via certified and regular mail at least 20 days before the hearing. If you or your child have criminal charges pending, you must send a copy of your filing to the prosecuting office (Attorney General or County Prosecutor. You will have to provide the court with proof that the appropriate parties have been notified of your intent to file for a name change for yourself and/or your minor child.
3. At the time of the hearing, you will have to present proof of current name(s) for you and/or your child. After you appear in court at the hearing, the court will record the signed Final Judgment and Final Judgment Addendum. You will have to send certified copies of the certified Final Judgment with the Final Judgment Addendum attached, to the Registrar of Vital Statistics and Department of Treasury *within 45 days after the date of the Judgment*. If you and/or your child have a driver's license, you will have to present a copy of the certified Final Judgment in person to the Motor Vehicle Commission.
4. You must send a *certified, sealed copy* of the Final Judgment with the Final Judgment Addendum attached, to the Department of Treasury **within 45 days** of the date of the Judgment.

Definitions of Words Used in This Packet

Certification - A *certification* is a written statement you make when you file your papers with the court in which you state that all the information contained in the papers is true to the best of your knowledge.

Docket Number - A *docket number* is the number the court assigns to your case so that it may be identified and located easily. Once you have a docket number, you must include it on all your communications with the court. Note: each name change filed will have its own docket number.

File - To *file* means to give the appropriate forms and fee to the court to begin the court's consideration of your case.

Final Judgment - The *final judgment* is a document signed by the judge which orders the name to be changed.

Order Fixing Date of Hearing - An *order fixing the date of hearing* is a signed paper from the judge indicating the date when you must come to court on your case. This order will contain your docket number and be returned to you by the Court.

Proof of Mailing - *Proof of mailing* is the green card you get back from the Post Office that proves that the material you sent by certified mail, return receipt requested, was received by the person to whom you sent it.

Verified Complaint - A *verified complaint* is a document in which you tell the court the facts of your case and state what relief you want the court to give you. You certify that the information is true to the best of your knowledge.

The numbered steps listed below tell you what forms you will need to fill out and what to do with them. Each form should be typed or printed clearly on 8 ½ “x 11” white paper only. Forms may not be filed on a different size or color paper.

Steps to Obtain a Court Order to Change Your Name

STEP 1: Fill out the *Verified Complaint* and *Certification of Confidential Information for Name Change* (Forms A and A1 - Adult; Forms F and F1 - Minor) for each person filing with the court.

The *Verified Complaint* (Form A - Adult; Form F - Minor) tells the court the current name of you/your child, what you want to change it to, and why you want it changed. Be sure to fill out a **separate** form for each person. If you and/or your child have ever been convicted of a crime, or if there are charges pending against you and/or your child, you must include this information in the *Verified Complaint*. You must sign the certification that states that the information in the complaint is true to the best of your knowledge.

The *Certification of Confidential Information for Name Change* (Form A1 - Adult, Form F1 - Minor), which contains confidential information such as social security numbers, must also be completed and signed. You must complete one *Certification of Confidential Information for Name Change* for each person.

STEP 2: Fill out the *Order Fixing Date of Hearing*, *Final Judgment* and *Final Judgment Addendum* (Forms B, C and C1 - Adult, Forms G, H, H1 - Minor) for each person filing with the court.

Enter the information requested. Note that there are places on the *Order Fixing Date of Hearing*, *Final Judgment* and *Final Judgment Addendum* that the court will complete.

STEP 3: Make a check or money order payable to *Treasurer, State of New Jersey* in the amount of \$250.00.

This is the fee for filing your papers.

Note: If you are changing the names of multiple family members, the \$250.00 fee covers all name change applications.

STEP 4: Check your completed forms and make copies.

Check your forms and make sure they are complete. Remove all instruction sheets. Make sure you have signed all the forms wherever necessary. If you are mailing or delivering your paperwork to the court, you must make two copies of each form. One copy will be sent to the court; the other is for your records.

Checklist - In Step 5 you will be directed to mail or deliver your documents to the court. The following checklist will help ensure your package is complete:

- The original of each of the forms you filled out: *Verified Complaint* (Form A - Adult and/or Form F - Minor), *Certification of Confidential Information for Name Change* (Form A1 - Adult and/or Form F1 - Minor), *Order Fixing Date of Hearing* (Form B - Adult and/or Form G - Minor), *Final Judgment* (Form C - Adult and/or Form H - Minor), and the *Final Judgment Addendum* (Form C1 - Adult and/or Form H1 - Minor).
- One copy of each of these forms: *Verified Complaint*, *Certification of Confidential Information for Name Change*, *Order Fixing Date of Hearing*, *Final Judgment*, and the *Final Judgment Addendum*.
- The filing fee in the amount of \$250. It must be a check or money order payable to the *Treasurer, State of New Jersey*.
- A stamped envelope addressed to yourself so that the court will be able to return the forms to you. Be sure to include adequate postage.

STEP 5: File your papers with the court.

You can file through Judiciary Electronic Document Submission (JEDS), through mail, or by delivery. If you are filing by mail or delivery, send the court the original plus one copy of all the forms: *Verified Complaint* (Form A - Adult and/or Form F - Minor), *Certification of Confidential Information for Name Change* (Form A1 - Adult and/or Form F1 - Minor), *Order Fixing Date of Hearing* (Form B - Adult and/or Form G - Minor), *Final Judgment* (Form C - Adult and/or Form H - Minor), and the *Final Judgment Addendum* (Form C1 - Adult and/or Form H1 - Minor) along with a self-addressed stamped envelope and the filing fee. The court address can be found on the Judiciary's website, njcourts.gov. If you mail the papers, we recommend that you use certified mail, return receipt requested.

STEP 6: Review copies returned from court.

The court will return copies of the *Verified Complaint*, *Certification of Confidential Information for Name Change* and *Order Fixing Date of Hearing* to you. Once you receive them, there will be a docket number written on all the copies (each name change filed will have its own docket number). The docket number is very

important because it identifies your case. It also lets the court know how to find your case. ***You must use the docket number on all future papers you send to the court about your case.*** The court will fill in the date on the Order Fixing Date of Hearing. That is the day you will appear before the judge to get the Final Judgment.

If you and/or your child **Do Not** have pending criminal or delinquent charges in New Jersey **skip to Step 8.**

STEP 7: If you and/or your child have criminal or delinquent charges pending, notify the Attorney General or County Prosecutor of the Application for a Name Change.

If you and/or your child have criminal or delinquent charges pending in New Jersey, you must send a copy of the Verified Complaint, Certification of Confidential Information for Name Change and Order Fixing Date of Hearing by regular mail and certified mail, return receipt requested to the Prosecutor of the county where the matter is being heard ***at least 20 days before*** the hearing.

If the charges were brought by the Office of the Attorney General, you must send a copy of the Verified Complaint, Certification of Confidential Information for Name Change and Order Fixing Date of Hearing to the Director of the Division of Criminal Justice as set forth in Step 8.

STEP 8: Notify the State of the Application for a Name Change for each person filing with the court. You must send a copy of the Order Fixing Date of Hearing by regular mail and certified mail, return receipt requested, to the Director of the Division of Criminal Justice in Trenton, New Jersey, ***at least 20 days before*** the hearing. Mail a copy to:

Director, Division of Criminal Justice
ATTN: Records and Identification Section
R. J. Hughes Justice Complex
25 Market Street
P. O. Box 085
Trenton, NJ 08625-0085

Note: If you and/or your child have criminal charges pending against them in New Jersey, you must also include a copy of the Verified Complaint and Certification of Confidential Information for Name Change.

STEP 9: Notify minor child's other parent.

If you are changing the name of a child who is under the age of 18 years and the child's other parent does not reside with you, you must send a copy of the Verified Complaint and the Order Fixing Date for Hearing to the last known address of the child's other parent. This

must be sent by regular mail and certified mail, return receipt requested. Your post office can tell you how to do this.

STEP 10: Complete Proof of Mailing (Form D - Adult, Form I - Minor) and send to court.

After you have mailed the required copies of the Verified Complaint, Certification of Confidential Information for Name Change and/or signed Order Fixing Date for Hearing, the post office will send you a green card (called a certified mail receipt) for each recipient that shows the mail was delivered. Once you get it back, fill out the form called *Proof of Mailing* (Form D - Adult, Form I - Minor) and select the appropriate response as to whether you sent the forms to the Division of Criminal Justice, or both the Division of Criminal Justice and the Prosecutor. Be sure to attach the green certified mail receipt(s) to the Proof of Mailing. Send the Proof of Mailing to the court. Keep a copy of it for your files.

STEP 11: Appear in court on the date set by the judge for your hearing.

Be sure to bring with you proof of current name(s) for you and/or your child.

STEP 12: Order Certified, Sealed Copies of the Final Judgment and the Final Judgment Addendum from the court.

After the hearing, the court will record the original Final Judgment and Final Judgment Addendum signed by the judge. Certified copies can be requested by self-represented individuals and attorneys through the Judiciary Electronic Document Submission (JEDS). You will need a ***certified, sealed copy*** of the Final Judgment with the Final Judgment Addendum attached, to be sent to **both** the Department of Treasury (Step 13) **and** the Registrar of Vital Statistics (Step 14). If you and/or your child are a licensed driver, a registered owner of a vehicle, or possess a handicapped or non-driver identification card, you must also present a ***certified, sealed copy*** of the Final Judgment with the Final Judgment Addendum attached, in person, at any Motor Vehicle Agency or Regional Service Center (Step 15). The fee for **each** ***certified, sealed copy*** is \$25.00.

STEP 13: Send a copy of the certified Final Judgment with the Final Judgment Addendum to the Department of Treasury

You must send a ***certified, sealed copy*** of the Final Judgment with the Final Judgment Addendum attached, to the Department of Treasury ***within 45 days after*** the date of the Judgment. You must include a check or money order payable to the *Treasurer, State of New Jersey*, in the amount of \$50. (Note: if you are changing the names of multiple family members, include the fee for **each** member.)

Mail the certified copy of the Final Judgment with the Final Judgment Addendum attached, with the check or money order and a stamped self-addressed envelope to:

Department of Treasury
Division of Revenue
Judgment Name Change Unit
P. O. Box 453
Trenton, NJ 08646

STEP 14: Notify the Registrar of Vital Statistics of the State.

You must send a *certified, sealed copy* of the *Final Judgment* with the *Final Judgment Addendum* attached, to the Registrar of Vital Statistics of the State in which you and/or your child was born. The Office of the Registrar is located in the capital city of the State in which you and/or your child was born. Check to see if the office requires a fee. If you and/or your child were born in New Jersey, the address for this office is:

Bureau of Vital Statistics
Attn: Vital Records Modifications Unit
P. O. Box 370
Trenton, NJ 08625

In New Jersey, there is a \$2.00 fee to process the legal name change. There is also a \$25.00 fee if you want to receive a corrected birth certificate, marriage license, civil union and/or domestic partnership record. There is a \$2.00 fee for each additional copy of the same certificate. Checks or money orders should be made payable to the *Treasurer, State of New Jersey* (make sure to account for each name change granted).

STEP 15: Notify the Motor Vehicles Commission.

If you and/or your child are a licensed driver, a registered owner of a vehicle, or possess a handicapped or non-driver identification card, you must present the *Final Judgment* with the *Final Judgment Addendum*, in person, at any Motor Vehicle Agency or Regional Service Center *within two weeks after the effective date* set forth in the Final Judgment.

NOTE: The effective date is *not* the date of the hearing or the date the Final Judgment was signed. The effective date is the date you and/or your child may begin using the assumed name(s).

Additional information is available at njmvc.gov regarding the list of acceptable documents to satisfy the 6 points of identification.

Adult Name Change Forms

For use if you are changing your name at the same time you are changing the name of a minor child.

Form A

Name

Street Address

City, State, Zip

Email Address

Telephone Number

In the Matter of the Application of:

Your Name

To Assume the Name of:

Name you wish to assume

Superior Court of New Jersey
Chancery Division - Family Part
_____ County

Docket No. _____
(To be filled in by the court)

Civil Action**Verified Complaint Including
Certification of Plaintiff for Name
Change**

The plaintiff, _____, whose place of residence is
(your name, first, middle, last)

_____, in the City of _____, County of _____
(street address) (city)

_____, in the State of New Jersey says:

1. I am the Plaintiff in this matter.
2. My current legal name is _____
(your name, first, middle, last)
3. My social security number can be found in the attached Certification of Confidential Information for Name Change.
4. I was born on _____.
(month, day, year)
5. I have since birth been identified by the following names: (first, middle, last)

6. I (check one) ☐ have ☐ have not been married.
7. I (check one) ☐ have ☐ have never been convicted of a crime, and have no criminal charges pending against me, except: (please supply county, municipality, nature, date of crime and/or pending charges)

8. This application (check one) ☐ is ☐ is not being made with the intent to avoid creditors or criminal prosecution or for other fraudulent purpose.

Form A

9. I (check one) ☐ have ☐ have no unsatisfied judgments of record, or suits pending against me, except: (enter any recorded judgments or pending suits)

10. I request this name change for the following reasons:

11. I (check one) ☐ have ☐ have not made any previous applications to assume another name.

12. I (check one) ☐ do ☐ do not have any pending applications for a name change in any other court or jurisdiction to the best of my knowledge and belief, except: (enter the state, county and docket number(s) of any pending applications)

13. Will you require

An interpreter?

☐ Yes

☐ No

Indicate language: _____

An accommodation for disability?

☐ Yes

☐ No

Indicate accommodation: _____

14. I understand that I must advise the court if there are any changes in the facts stated in this Verified Complaint.

WHEREFORE, plaintiff demands judgment pursuant to *N.J.S.A.* 2A:52-1 to -4.

s/

Signature of Plaintiff

Certification

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Dated

s/

Signature of Plaintiff

Form A1

Name

Street Address

City, State, Zip

Email Address

Telephone Number ext.

In the Matter of the Application of:

Your Name

To Assume the Name of:

Name you wish to assume

Superior Court of New Jersey
Chancery Division - Family Part
_____ County

Docket No. _____
(To be filled in by the court)

Civil Action**Certification of Confidential Information
for Name Change**

In support of my application for a change of name, I, _____,
(your name, first, middle, last)

state the following:

1. I am the Plaintiff in this matter and currently reside at _____,
(street address)
in the City of _____, County of _____, in the State of New Jersey.
(City) (County)
2. My social security number is _____.

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Dated

s/_____
Signature of Plaintiff

Form B

Name _____

Street Address _____

City, State, Zip _____

Email Address _____

ext. _____

Telephone Number _____

In the Matter of the Application of:

Your Name _____

To Assume the Name of:

Name you wish to assume _____

Superior Court of New Jersey
Chancery Division - Family Part
_____ CountyDocket No. _____
(To be filled in by the court)**Civil Action****Order Fixing Date of Hearing**Application being made to the Court by _____,
(your name, first, middle, last)

for a judgment authorizing the applicant to assume another name and for the entry of an order fixing a date for the hearing of such application,

DO NOT WRITE BELOW THIS LINE THE COURT WILL COMPLETE

IT IS ON THIS ____ day of _____, 20__, **ORDERED** that the ____ day of _____, 20__, at ____ a.m., or as soon thereafter as the matter can be heard, at the courthouse in the City of _____, County of _____, State of New Jersey, be fixed as the time and place for the hearing of such application and of any objections that may be made thereto.

s/ _____
J.S.C.

NOTE: A copy of the Order Fixing Date of Hearing must be served on the Director of the Division of Criminal Justice. If there are criminal charges pending, copies of the Verified Complaint, Certification of Confidential Information for Name Change and Order Fixing Date of Hearing must be sent via regular mail and certified mail and served on the County Prosecutor and/or the Office of the Attorney General.

Form C

Name _____

Street Address _____

City, State, Zip _____

Email Address _____

ext. _____

Telephone Number _____

In the Matter of the Application of:

Your Name _____

To Assume the Name of:

Name you wish to assume _____

Superior Court of New Jersey
Chancery Division - Family Part
_____ County

Docket No. _____
(To be filled in by the court)

Civil Action

Final Judgment

_____, having made application to this Court by duly
(your name, first, middle, last)
verified complaint for a judgment authorizing the applicant to assume the name of

_____, and it appearing to the Court that all the provisions of
(name you wish to assume)

N.J.S.A. 2A:52-1-4 and the Current *N.J. Court Rules* relating thereto have been complied with:

IT IS ON THIS ____ day of _____, 20____, **ORDERED** and **ADJUDGED** that
(leave blank for the court to complete)

_____, who was born on _____, and whose social
(your name, first, middle, last) (month, day, year)

security number is contained in the attached Final Judgment Addendum, be and hereby is authorized to

assume the name of _____, effective _____,
(name you wish to assume) (leave blank for the court to complete)

(NOTE: This is the date you may begin using your assumed name), and

DO NOT WRITE BELOW THIS LINE THE COURT WILL COMPLETE

IT IS FURTHER ORDERED that within forty-five days after entry of Judgment, a certified copy of this Final Judgment, with the Final Judgment Addendum attached, must be sent to the Department of Treasury pursuant to the provisions of the Statute and Rules in such case made and provided.

Dated _____

s/ _____

J.S.C.

Form C1

Final Judgment Addendum

Pursuant to the Final Judgment dated _____, _____,
(leave blank for the court to complete) (your name, first, middle, last)

whose social security number is _____, is authorized to assume the name of

_____.
(name you wish to assume)

This Final Judgment Addendum shall not be made public in any form.

Form D_____
Name_____
Street Address_____
City, State, Zip_____
Email Address_____
ext._____
Telephone Number**In the Matter of the Application of:**_____
Your Name**To Assume the Name of:**_____
Name you wish to assumeSuperior Court of New Jersey
Chancery Division - Family Part
_____ CountyDocket No. _____
(To be filled in by the court)**Civil Action****Proof of Mailing****A. Check the appropriate box(es), below:**

- ☐ On _____, I, the undersigned, mailed a copy of the Order Fixing Date of Hearing in accordance with the *Rules of Court* to the Division of Criminal Justice of New Jersey, via certified mail, return receipt requested.

OR

- ☐ On _____, I, the undersigned, mailed a copy of the Verified Complaint for Change of Name, Certification of Confidential Information for Name Change and Order Fixing Date of Hearing in accordance with the *Rules of Court* to (check all that apply):

- ☐ the Division of Criminal Justice of New Jersey, via certified mail, return receipt requested;
- ☐ the Prosecutor of _____ County, via regular mail and certified mail, return receipt requested.

B. Attached are the green return mail receipt(s) for (check all that apply):

- ☐ the Division of Criminal Justice of New Jersey
- ☐ the Prosecutor of _____ County

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Dated

s/

Signature

Minor Name Change Forms

For use if you are changing the name of a minor under the age of 18. If you are changing the names of multiple children, a separate form must be filled out for each.

Form F

Name _____

Street Address _____

City, State, Zip _____

Email Address _____

ext. _____

Telephone Number _____

In the Matter of the Application of:

Your Name (first, middle, last)

To Change the Name of:

Name of Minor Child (first, middle, last)

To:

Name you wish your child to assume

Superior Court of New Jersey
Chancery Division - Family Part
_____ County

Docket No. _____
(To be filled in by the court)

Civil Action**Verified Complaint Including
Certification of Plaintiff for Name
Change of Minor Child**

The plaintiff, _____, whose place of residence is
(your name, first, middle, last)

_____, in the city of _____, County of
(street address) (city)

_____, in the State of New Jersey says:

1. I am the parent/guardian of _____, and make this application
(child's name, first, middle, last)
to change my child's name to _____.
(name you want your child to assume)
2. My child's social security number can be found in the attached Certification of Confidential Information for Name Change.
3. My child was born on _____.
(month, day, year)
4. My child's other parent/guardian is named _____. They reside at _____.
5. My child is being raised by _____, and _____.
6. My child (check one) ☐ has ☐ has not been married.
7. There (check one) ☐ are ☐ are no unsatisfied judgments of record, or suits pending against my child, except: (enter any recorded judgments or pending suits)

Form F

8. This application (check one) ☐ is ☐ is not being made with the intent to avoid creditors or criminal prosecution or for other fraudulent purpose.
9. My child (check one) ☐ has ☐ has not made any previous applications to assume another name.
10. I desire my child to have the name of: _____.
(first, middle, last)

11. I request this name change for the following reasons:

12. Will you require

An interpreter? ☐ Yes ☐ No Indicate language: _____
An accommodation for disability? ☐ Yes ☐ No Indicate accommodation: _____

WHEREFORE, plaintiff demands judgment pursuant to *N.J.S.A. 2A:52-1 to -4*.

s/_____
Signature of Plaintiff

Certification

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Dated

s/_____
Signature of Plaintiff

Form F1

Name

Street Address

City, State, Zip

Email Address

Telephone Number

In the Matter of the Application of:

Your Name (first, middle, last)

To Change the Name of:

Name of Minor Child (first, middle, last)

To:

Name you wish your child to assume

Superior Court of New Jersey
Chancery Division - Family Part
_____ County

Docket No. _____
(To be filled in by the court)

Civil Action**Certification of Confidential Information for
Name Change**

In support of my application for a change of name of my minor child, I, _____,
(your name, first, middle, last)
state the following:

1. I am the Plaintiff in this matter and currently reside at _____,
(street address)
in the City of _____, County of _____, in the State of New Jersey.
(City) (County)
2. My child's social security number is _____.

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Dated

s/_____
Signature of Plaintiff

Form G

Name _____

Street Address _____

City, State, Zip _____

Email Address _____

ext. _____

Telephone Number _____

In the Matter of the Application of:

Your Name (first, middle, last) _____

To Change the Name of:

Name of Minor Child (first, middle, last) _____

To:

Name you wish your child to assume _____

Superior Court of New Jersey
Chancery Division - Family Part
_____ CountyDocket No. _____
(To be filled in by the court)**Civil Action****Order Fixing Date of Hearing**Application being made to the Court by _____,
(your name, first, middle, last)for a judgment authorizing the applicant's minor child to assume another name and for the entry of an
order fixing a date for the hearing of such application,**DO NOT WRITE BELOW THIS LINE THE COURT WILL COMPLETE**

IT IS ON THIS ____ day of _____, 20__, **ORDERED** that the ____ day of
_____, 20__, at ____ a.m., or as soon thereafter as the matter can be heard, at the courthouse
in the City of _____, County of _____, State of New Jersey, be fixed as the
time and place for the hearing of such application and of any objections that may be made thereto.

s/ _____
J.S.C.

NOTE: Copies of the Verified Complaint and Order Fixing the Date of the Hearing must be sent to the other parent of the minor child via regular mail and certified mail. A copy of the Order Fixing Date of Hearing must be served on the Director of the Division of Criminal Justice. If there are criminal charges pending, copies of the Verified Complaint, Certification of Confidential Information for Name Change and Order Fixing Date of Hearing must be sent via regular mail and certified mail and served on the County Prosecutor and/or the Office of the Attorney General.

Form H

Name

Street Address

City, State, Zip

Email Address

ext. _____

Telephone Number

In the Matter of the Application of:

Your Name (first, middle, last)

To Change the Name of:

Name of Minor Child (first, middle, last)

To:

Name you wish your child to assume

Superior Court of New Jersey
Chancery Division - Family Part
_____ County

Docket No. _____
(To be filled in by the court)

Civil Action

Final Judgment

_____, having made application to this Court by duly
(your name, first, middle, last)
verified complaint for a judgment authorizing the applicant's minor child to
assume the name of _____, and it appearing to the Court that all the
(name you wish your child to assume)
provisions of *N.J.S.A. 2A:52-1-4* and the Current *N.J. Court Rules* relating thereto have been complied with:

IT IS ON THIS _____ day of _____, 20____, **ORDERED** and **ADJUDGED** that
(leave blank for the court to complete)

_____, who was born on _____, and whose social security
(your child's name, first, middle, last) (month, day, year)
number is contained in the attached Final Judgment Addendum, be and hereby is authorized to assume the name
of _____, from and after _____, and
(name you wish your child to assume) (leave blank for the court to complete)

DO NOT WRITE BELOW THIS LINE THE COURT WILL COMPLETE

IT IS FURTHER ORDERED that within forty-five days after entry of Judgment, a certified copy of
this Final Judgment, with the Final Judgment Addendum attached, must be sent to the Department of Treasury
pursuant to the provisions of the Statute and Rules in such case made and provided.

Dated

s/ _____
J.S.C.

Form H1

Final Judgment Addendum

Pursuant to the Final Judgment dated _____, _____,
(leave blank for the court to complete) (your child's name, first, middle, last)

whose social security number is _____, is authorized to assume the name of

_____.
(name you wish your child to assume)

This Final Judgment Addendum shall not be made public in any form.

Form J_____
Name_____
Street Address_____
City, State, Zip_____
Email Address_____
ext._____
Telephone Number**In the Matter of the Application of:**_____
Your Name (first, middle, last)**To Change the Name of:**_____
Name of Minor Child**To:**_____
Name you wish your child to assumeSuperior Court of New Jersey
Chancery Division - Family Part_____
CountyDocket No. _____
(To be filled in by the court)**Civil Action****Proof of Mailing**

Check the appropriate box(es), below:

- ☐ On _____, I, the undersigned, mailed a copy of the Order Fixing Date of Hearing in accordance with the *Rules of Court* to the Division of Criminal Justice of New Jersey, via certified mail, return receipt requested.

OR

- ☐ On _____, I, the undersigned, mailed a copy of the Verified Complaint for Change of Name, Certification of Confidential Information for Name Change and Order Fixing Date of Hearing in accordance with the *Rules of Court* to: (check all that apply):

- ☐ the Division of Criminal Justice of New Jersey, via certified mail, return receipt requested;
- ☐ the Prosecutor of _____ County, via regular mail and certified mail, return receipt requested.
- ☐ the non-party parent of the minor child at his or her last known address, via certified mail, return receipt requested;

Note: Attached are the green return mail receipt(s) for (check all that apply):

- ☐ the Division of Criminal Justice of New Jersey
- ☐ the Prosecutor of _____ County
- ☐ the non-party parent of the minor child;

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

Dated_____
s/
Signature