

# NAME CHANGE GUIDE ADULT ONLY

Please read this entire guide before you go any further. Remember that this is only a guide and not an all-inclusive document. If you have further questions you may need to consult with an attorney before going further. The filing fee is not refundable if you change your mind.

## WHAT AN ADULT MUST DO TO FILE FOR A CHANGE OF NAME HEARING

- You must file in the county where you live.
- You must have lived within the State of Minnesota at least six months.
- Pay the civil filing fee and certified copy fee or proceed in forma pauperis. ([Fee Schedule](#))
- At the hearing you must bring two adult witnesses who have known you for one year or longer. Your witnesses may be relatives. If you are married, one of your witnesses should be your spouse/ domestic partner registered in accordance with Minneapolis City Ord. 142.20(a).
- If you own your home or other real estate, you need to have the legal description when you file your documents.

## CRIMINAL RECORD CHECK (Minnesota Statute 259.11)

Minn. Stat. § 259.11 requires the Court to determine whether any person seeking to have their name changed has a criminal history in Minnesota or any other state. The court may conduct a search of national records through the Federal Bureau of Investigation by submitting a set of fingerprints and the required fee to the Bureau of Criminal Apprehension. To comply, you must complete a Criminal History Check Release form for each party covered by the application. If you are changing the name of a minor who is 14 years of age or older, both the minor and the parent must sign the release form. A criminal history check will be made on all persons listed on the application.

**If the applicant has a criminal history, both the person whose name is changed and the Court shall report the change within 10 days of receiving a copy of the order by mailing a copy of the order granting the name change to:**

Attention: CRIS Section  
Bureau of Criminal Apprehension  
1430 Maryland Avenue East  
St. Paul, MN 55106

**Note:** Any information placed in name change file will be accessible to the public, unless the court determines that the name change is made in connection with participation in a victim or witness protection program.

You will need to prove to the Court by clear and convincing evidence that your application for name change is not based on the intent to defraud, is made in good faith, will not cause injury to a person and will not compromise public safety. Absent this evidence, your name change will not be granted.

### **For criminal history in Hennepin County:**

Hennepin County Attorney's Office  
C-2100 Government Center  
300 South Sixth Street  
Minneapolis, MN 55487

### **For criminal history in Ramsey County:**

Director, Prosecution Division  
Ramsey County Attorney's Office  
50 West Kellogg Blvd., Suite 315  
St Paul, MN 55102

## FORMS THAT ARE REQUIRED TO OPEN A CHANGE OF NAME

- Application for name change
- Order granting name change
- Request for Copy form (not required but highly encouraged)

- If there is a criminal history, proof of service of Application of Name Change on the prosecuting authority and/or Attorney General

You may bring your forms here to fill in using a sample we will provide. The forms should be typed or legibly written using black ink. Be sure the “For a change of name to” name(s) appear exactly, do not use initials, unless that is the way you want the name changed.

A married couple or a couple registered as domestic partners with the City of Minneapolis under Minneapolis City Ordinance 142.20(a) may complete one application listing both parties (one application per file with one filing fee). All other adults including related adults must complete separate applications (each application is a file and the filing fee must be paid for each file).

The Civil Intake Department cannot fill out your forms for you.

**Do not sign the application.** Your signature must be witnessed and notarized by a court clerk or a notary.

If you own the house you live in, or any other property, we need the legal description of the property. (**This is not the address.**) You can find the legal description on the deed, contract for deed or mortgage or on the 5<sup>th</sup> floor of the Administrative Tower of the Government Center or call 612-348-3011.

Bring your forms to the Civil Intake counter on the Public Service Level (2nd floor) of the Hennepin County Government Center, 300 South Sixth Street, Minneapolis, MN from 8:00 a.m. to 4:30 p.m. Monday - Friday, except on Wednesdays the hours are 8:00 a.m. to 1:30 p.m. (closed on legal holidays). Or, mail them to Civil Filing, MC 332 Government Center, 300 So 6th St, Mpls, MN 55487-0332.

A filing fee and a fee for each certified copy of the signed order you will need is required ([Fee Schedule](#)). The copies you have requested will be mailed out to you after the hearing. All checks written to the Court must be made payable to District Court Administrator.

In approximately two weeks, a “Notice of Judicial Officer Assignment” will be mailed to you. On this Notice will be the name of the Judge assigned to the case. *You will need to wait until you have your assignment before calling for a hearing date and courtroom number.* Contact the Judge’s clerk that has been assigned. The clerk who assists in filing your case will give a list of Judges and their phone numbers to call to schedule your hearing. You may also check for the phone numbers on-line at:

<http://www.mncourts.gov/district/4/?page=1629>.

- **If you have a felony conviction your hearing date cannot be less than 45 days from filing.**  
(This time frame is set by Statute.)

#### **WHAT YOU NEED TO DO ON THE DAY OF YOUR HEARING**

- Come at the assigned time with your two adult witnesses and go straight to the courtroom

#### **GETTING A CERTIFIED COPY OF THE SIGNED ORDER GRANTING NAME CHANGE**

You need to fill out a request form. You can do this at the time you file your application. There is a fee for each certified copy you request. ([Fee Schedule](#)) **Your certified copy will be mailed in two to three weeks after your hearing.** You may make additional photocopies of the certified copy as needed. A certified copy of the Order is required to change your driver’s license, social security records, etc.

**It is your responsibility to notify all interested people, businesses, employers, schools, etc. of your new name.** It is up to those you notify of your name change to inform you whether they require a certified copy or a plain copy

of the Order Granting Name Change. An extensive list will be given to you in Court as to whom you may need to notify.

**APPLICATION FOR NAME CHANGE BY A PERSON CONVICTED OF A FELONY CHARGE:**

An applicant with a felony conviction under Minnesota law or the law of another state or federal jurisdiction shall serve notice regarding their application for name change on the prosecuting authority that obtained the conviction. If the conviction is from another state or federal jurisdiction, notice must also be served on the Minnesota Attorney General at 102 State Capitol Building, St. Paul, MN 55155. The method of service is complicated. To determine the proper method of service, consult an attorney. Local practices may vary. Proof of service shall be filed with the court as part of the name change request. The prosecuting authority has 30 days to object to the name change application.

**Ask the clerk for the notice that is to be sent out and the proof of service forms.**

**ADDITIONAL INFORMATION WHICH MAY BE BENEFICIAL TO YOU**

- You do not have to be a citizen of the United States to have your name changed, but you must contact the Department of Justice, Immigration and Naturalization Service to determine any special requirements they may have.
- If you are requesting an Order to change the sex on the birth certificate you must contact the Department of Health for the requirements. If it is mandatory that you have a hearing for the change **and** you are changing your name, you can use these forms. You should add a sentence on the Application and Order requesting/ordering the Department of Health to change, amend or correct the sex. You should bring a doctor's proof of the sex change to the hearing. **If you are not changing your name you cannot use these forms.**

STATE OF MINNESOTA  
COUNTY OF HENNEPIN

FOURTH JUDICIAL DISTRICT  
DISTRICT COURT

Interpreter Requested

Language \_\_\_\_\_

Case Number \_\_\_\_\_

**APPLICATION FOR NAME CHANGE**

In the matter of the application of:

For a change of name to:

\_\_\_\_\_  
*First Middle Last*

\_\_\_\_\_  
*First Middle Last*

\_\_\_\_\_  
*First Middle Last*

\_\_\_\_\_  
*First Middle Last*

The undersigned applicant sworn on oath states that:

1. This application is made in good faith, without intent to defraud or mislead.
2. Applicant has resided in the State of Minnesota for at least six months immediately prior to the date of this application and now resides at:

*No. Street City/Town State Zip*  
 in Hennepin County, and was born on \_\_\_\_\_, at \_\_\_\_\_  
*DOB City*  
 in \_\_\_\_\_.  
*Country*

3.  No party to this application has a criminal history **OR**

The following parties included in this application have a criminal history:

\_\_\_\_\_

\_\_\_\_\_

The following parties included in this application have been convicted of a felony:

\_\_\_\_\_

\_\_\_\_\_

**(List name, date of offense, and state.) Permission is granted to release criminal history information to the court by appropriate agencies including the BCA to determine the accuracy of this statement.**

4. Former name(s) the applicant(s) has been known as \_\_\_\_\_

5. Name of spouse/domestic partner registered in accordance with Minneapolis City Ord. 142.20(a) and date of birth: \_\_\_\_\_

This application  does  does not include spouse/domestic partner registered in accordance with Minneapolis City Ord. 142.20(a)

Name(s) of all minor children, dates and places of birth: \_\_\_\_\_

\_\_\_\_\_

This application does not include minor children listed above.

6. Legal description of lands in the State of Minnesota upon which the following have a claim, interest, or lien:

*Legal Description (Attach additional sheet if necessary)*

Applicant \_\_\_\_\_

Spouse/Domestic Partner registered in accordance with Minneapolis City Ord. 142.20(a)  
\_\_\_\_\_

7. Applicant requests:

To have his/her name changed to \_\_\_\_\_

To have the name of his/her spouse/domestic partner registered in accordance with Minneapolis City Ord. 142.20(a) changed to \_\_\_\_\_

8.  I am currently involved in a victim or witness protection program.

9. Other: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
*Co-Applicant's Signature*

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*Telephone*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*Zip*

\_\_\_\_\_  
*Telephone*

**State of Minnesota**

**VERIFICATION**

County of \_\_\_\_\_

\_\_\_\_\_ being duly sworn on oath says that he/she has read the forgoing application and knows the contents thereof and that the same is true of his/her own knowledge. Subscribed and sworn to before me on

\_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
*Notary Public/Clerk*

\_\_\_\_\_  
*Applicant's Signature*

\_\_\_\_\_  
*My Commission Expires*

\_\_\_\_\_  
*Co-Applicant's Signature*

## **INSTRUCTIONS FOR COMPLETING THE APPLICATION FOR NAME CHANGE**

1. This application is made under oath, so do not proceed if it is not made in good faith and there is any intent to defraud or mislead anyone by the change of name
2. Do not proceed with the application if you have not resided in Minnesota for at least six months immediately before making this application. If you have, show your present address.
3. The court is required to determine whether anyone named in this application has a criminal history in Minnesota or in any other state. A criminal history check will be made on all persons listed. The court may conduct a search of national records through the Federal Bureau of Investigation by submitting a set of fingerprints and the required fee to the Bureau of Criminal Apprehension. The Court and the applicant shall report the change to the Bureau of Criminal Apprehension, Attn: Criminal History Unit, 1430 Maryland Avenue, St. Paul, MN 55106. An inmate confined in a correctional facility may request a name change only once, and may proceed in forma pauperis only when the failure to allow the name change would infringe on a constitutional right of an inmate. Inmates must fill out an additional affidavit.
4. Indicate any names you have had or have been known by.
5. Indicate name and date of birth of spouse/ domestic partner registered in accordance with Minneapolis City Ord. 142.20(a) and whether your application does or does not include spouse/ domestic partner registered in accordance with Minneapolis City Ord. 142.20(a). Indicate name(s) and date(s) of birth of the minor(s). (If your application includes minors you need to use a different form).
6. If there are lands upon which you and/or a spouse/ domestic partner registered in accordance with Minneapolis City Ord. 142.20(a) (if included in application) have a claim, interest or lien, give the description, the nature of the interest and show who has that interest in those lands. This information is to be shown on a separate sheet and attached to the application.
7. Show the manner in which your name is to be changed; and also the name of a spouse/ domestic partner registered in accordance with Minneapolis City Ord. 142.20(a), if applicable.

Sign the application before a person authorized to acknowledge a signature, and also complete the verification. If a spouse/ domestic partner registered in accordance with Minneapolis City Ord. 142.20(a) is included, he or she must also sign.

**Two witnesses that you know must appear with you in court and testify as to your identity.**

ORDER GRANTING NAME CHANGE

Case Number \_\_\_\_\_

In the matter of the application of:

For a change of name to:

\_\_\_\_\_  
First Middle Last

\_\_\_\_\_  
First Middle Last

\_\_\_\_\_  
First Middle Last

\_\_\_\_\_  
First Middle Last

The above entitled matter came on for hearing before the undersigned Judge on \_\_\_\_\_ upon the  
Application for a Change of Name. Upon the testimony and files, the Court finds the following:  
*date*

1. That the application is made in good faith without intent to defraud or mislead.
2. That the applicant has resided in the State of Minnesota for at least six months immediately preceding the filing of the within application, and now lives in Hennepin County at:

No.	Street	City/Town	State	Zip
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3.  That no party included in this application has a criminal history in any state OR  
 That the following parties included in this application have a criminal history:

\_\_\_\_\_  
 AND  Proper notice has been given to the prosecuting authority and MN Attorney General  
 AND  No objection has been filed

4. Former name(s) the applicant has been known as \_\_\_\_\_
5. Name of applicant and date of birth: \_\_\_\_\_  
 Name of spouse/domestic partner registered in accordance with Minneapolis City Ord. 142.20(a) and date of birth: \_\_\_\_\_

\_\_\_\_\_  
 This application  does  does not include spouse/domestic partner registered in accordance with  
 Minneapolis City Ord. 142.20(a)

Name(s) of all minor children, dates and places of birth: \_\_\_\_\_

\_\_\_\_\_  
 This application does not include minor children listed above.

6. Legal description of lands in the State of Minnesota upon which the following have a claim, interest, or lien:  
***Legal Description (Attach additional sheet if necessary)***

Applicant \_\_\_\_\_

Spouse/Domestic Partner registered in accordance with Minneapolis City Ord. 142.20(a)  
 \_\_\_\_\_

7. That the applicant desires:

To have his/her name changed to \_\_\_\_\_

To have the name of his/her spouse/domestic partner registered in accordance with Minneapolis City Ord. 142.20(a) changed to \_\_\_\_\_

8. Other \_\_\_\_\_

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**IT IS HEREBY ORDERED:**

The application is granted.

The legal name of the Applicant shall be \_\_\_\_\_

The legal name of the spouse/domestic partner registered in accordance with Minneapolis City Ord. 142.20(a) shall be \_\_\_\_\_

Other \_\_\_\_\_

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**DUTY TO REPORT NAME CHANGE MINNESOTA STATUTE 259.11B**

If you have a criminal history and have changed your name, you have a duty to report your name change to the Bureau of Criminal Apprehension located at 1430 East Maryland Avenue, St Paul, MN 55106, 651-793-2400 **within ten (10) days of this order.** Failure to do so is a gross misdemeanor punishable by up to one (1) year in prison and/or a fine of \$3000.

**Note:** The applicant shall file a certified copy of this order with the County Recorder or Registrar or Titles for Torrens Property of each county where the applicant, spouse/domestic partner registered in accordance with Minneapolis City Ord. 142.20(a) or minor children claims an interest in land.

**BY THE COURT**

Date: \_\_\_\_\_

\_\_\_\_\_  
**District Court Judge**