

\_\_\_\_\_  
Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

**Check your email.** You will receive information and documents at this email address.

I am  Plaintiff/Petitioner  Defendant/Respondent

In the Juvenile Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

<p>State of Utah, in the interest of</p> <p>_____ Last name, first name</p> <p>_____ Date of birth</p> <p>A minor <input type="checkbox"/> under <input type="checkbox"/> over 18 years of age, and <input type="checkbox"/> represented <input type="checkbox"/> not represented.</p>	<p><b>Notice of Change of Name</b></p> <p>_____ Case Number</p> <p>_____ Judge</p>
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I am the  Petitioner  
 Respondent

Please take notice that my name has changed. My new name is:

\_\_\_\_\_

The reason my name has changed is:

\_\_\_\_\_

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at \_\_\_\_\_ (city, and state or country).

\_\_\_\_\_  
Date

Signature ► \_\_\_\_\_

Printed Name \_\_\_\_\_

### Certificate of Service

I certify that I filed with the court and am serving a copy of this Motion on the following people.

Person's Name	Service Method	Service Address	Service Date
(Prosecutor)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Intake/Probation Officer)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Attorney General)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Guardian ad Litem)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Other)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Other)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Other)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Other)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		

Signature ► \_\_\_\_\_

Date \_\_\_\_\_

Printed Name \_\_\_\_\_