

INSTRUCTIONS

ADULT NAME CHANGE PETITION

PLEASE PRINT CLEARLY

***IT IS STRONGLY RECOMMENDED THAT YOU
CONSULT AN ATTORNEY***

DISCLAIMER

THE SELF HELP CENTER STAFF AND THE STAFF IN ANY COURT OFFICE ARE NOT PERMITTED TO GIVE YOU LEGAL ADVICE. THE INFORMATION IN THIS PACKET IS NOT A SUBSTITUTE FOR PROFESSIONAL LEGAL ADVICE. THE COURT ASSUMES NO RESPONSIBILITY AND ACCEPTS NO LIABILITY FOR ACTIONS TAKEN BY USERS OF THESE DOCUMENTS, INCLUDING RELIANCE ON THEIR CONTENTS. IF YOU WANT TO OBTAIN THE SERVICES OF AN ATTORNEY BUT DO NOT KNOW WHOM TO CONTACT, YOU MAY CALL THE DAUPHIN COUNTY LAWYER REFERRAL SERVICE AT (717) 232-7536.

**PETITION FOR A NAME CHANGE NOT RELATED TO A
DIVORCE ACTION FOR AN ADULT (18 YEARS OF AGE OR
OLDER)**

PLEASE NOTE: YOU MUST RESIDE IN DAUPHIN COUNTY IN ORDER TO FILE A PETITION FOR A NAME CHANGE IN DAUPHIN COUNTY.

IF YOU WANT TO CHANGE THE NAME OF A CHILD (UNDER THE AGE OF 18), DO NOT USE THIS PACKET OF FORMS AND INSTRUCTIONS BUT USE THE MINOR NAME CHANGE PETITION FORMS AND INSTRUCTIONS

The Court Order with Notice of Language Rights, Petition (including Verification and Certification), Entry of Appearance as a Self-Represented Party, and Decree must be prepared using the blank forms attached.

There are four (4) documents in the packet of forms.

1) COURT ORDER

At the top left-hand corner of the Order, enter your present name. You will receive a case number when you file the forms with the Prothonotary's Office. Do not fill out anything under the words "Court Order." However, fill in your name and address under the word "Distribution" at the bottom of the second page of the Order.

2) PETITION FOR CHANGE OF NAME

At the top of the form, print your present name, address, telephone number, and email address (if you have one).

Directly underneath you will complete the caption. Enter your present name. You will receive a case number when you file the forms with the Prothonotary's Office.

Above Line 1, enter your present name.

LINE 1. Print your present name (you are the Petitioner) and complete address.

LINE 2. Enter your year of birth, birthplace, and birth certificate number.

LINE 3. Enter all addresses where you have lived for the past five (5) years.

LINE 4. Enter the new name that you desire to have.

LINE 5. Enter the reasons why you want to change your name.

LINE 6-7. The court will not grant a name change if that name change is harmful to the interests of another person or if the name change would defraud creditors. There is nothing to enter.

LINE 8. Enter your complete present name followed by the complete new name that you desire to have.

Sign the Petition using your present name. **Print** your present name under the signature.

Complete the “Verification” and “Certification”.

3) DECREE FOR CHANGE OF NAME

At the top of the Decree, enter your present name in the caption. You will receive a case number when you file the forms with the Prothonotary’s Office. Under the title “Decree for Change of Name” do **not** fill in the date. The Court will date the decree. Fill in the appropriate spaces with your present name, birth year, birthplace, and the new name you desire to have. The Court will sign the Decree if the Court determines that the Name Change Petition should be granted. Fill in your name and address at the bottom of the page under the heading “Distribution.”

4) ENTRY OF APPEARANCE AS A SELF-REPRESENTED PARTY

Complete the caption as you did for the scheduling order and petition.

1. There is nothing to complete.
2. Enter your address that is to be used for the mailing of court notices. Check if this is or is not your home address.
3. Enter the telephone number you can be reached from 8:00 a.m. to 4:30 p.m. Monday through Friday. If you have an email address, please enter this if you wish to be contacted by email.
4. There is nothing to complete.
5. There is nothing to complete.

Sign and date this form after you have read the statement above the signature line and file this with the Prothonotary at the same time you file the Petition.

AFTER YOU HAVE COMPLETED ALL THE FORMS:

1. **Copies:** make two (2) copies of all the forms for a total of three (3) completed petitions.
2. **Filing:** Take the original with the two (2) copies, and the filing fee (see Prothonotary's Fee Schedule) (payable by cash, certified check or money order made payable to Dauphin County Prothonotary) to the Prothonotary's Office – located on the first floor of the Dauphin County Courthouse Room 101, 101 Market Street, Harrisburg, PA 17101. The Prothonotary's Office is open from 8:00 a.m. – 4:30 p.m. Monday – Friday. The Prothonotary's Office will give your case a docket number and collect the fees.



BEFORE YOU FILE THIS PETITION WITH THE PROTHONOTARY, MAKE SURE YOU HAVE COMPLETED THE FOLLOWING:

- Court Order scheduling the hearing (the caption and distribution)
- Petition for Change of Name
- Decree for Change of Name (do not date)
- Entry of Appearance as a Self-Represented Party
- Two copies made of the above documents
- Cash, certified check or money order made payable to Dauphin County Prothonotary

FINGERPRINTS

After the Petition is filed, go to your local police department to get fingerprinted. If you do not have a local police department, go to the Pennsylvania State Police Barracks located at 8000 Bretz Drive, Harrisburg (Hours: M-TH 8:00 a.m.-12:00 p.m. 12:30 p.m.–3:30 p.m. Tuesday extended hours 6:00 p.m.-9:00 p.m.) and get fingerprinted. Bring the fingerprint card back to the Prothonotary's Office. The Prothonotary's Office will send the fingerprint card to the Pennsylvania State Police for a report. The Pennsylvania State Police will send a formal report to the Prothonotary's Office.

When the Pennsylvania State Police report is received by the Prothonotary's Office, the file will be sent to the Court Administrator's Office for assignment to a judge. The assigned judge will issue a scheduling order.

WHEN YOU RECEIVE THE COURT ORDER SCHEDULING THE HEARING DATE:

1. **Publication:**

After you have received the information for your hearing date and time, you must publish the hearing date and time in **both** a newspaper of general circulation in Dauphin County **and** the Dauphin County Reporter, unless the Court directs otherwise. The Dauphin County Reporter is the designated legal periodical for Dauphin County. Contact the Dauphin County Bar Association at (717) 232-7536 for information on publishing in the Dauphin County Reporter.

Please note that the **DEADLINE** for advertising in the Dauphin County Reporter is **12:00 NOON ON TUESDAY FOR PUBLICATION ON FRIDAY**. **Certified proof of publication must be brought to the hearing.**

2. **Prothonotary Certification**: An official search of the proper offices of any county where you have resided within the past five (5) years must be conducted.

No more than 48 hours prior to your hearing, proper certification is required from the Dauphin County Prothonotary's Office verifying that there are no judgments, decrees of record or any other of like character against you. The Prothonotary's Office will complete a certification form after the search has been completed. The Dauphin County Prothonotary's Office will charge a fee for certifying a search in Dauphin County.

If you have resided in another county in this Commonwealth or any foreign jurisdiction, the official search in that jurisdiction can be done at any time between the filing of the name change petition and the hearing date.

ON THE DAY OF YOUR HEARING, YOU MUST BRING TO COURT:

1. **Proof of Publication** in the Dauphin County Reporter AND a newspaper of general circulation in Dauphin County; and
2. **Signed Certification of a Name Search** from the Prothonotary's Office in each county where you have resided for the last five (5) years.



BEFORE YOU COME INTO THE COURTROOM FOR THE NAME CHANGE HEARING, MAKE SURE YOU HAVE THE FOLLOWING DOCUMENTS:

- Proof of Publication in the Dauphin County Reporter
- Proof of Publication in a newspaper of general circulation in Dauphin County
- Signed Certification of a Name Search from the Prothonotary's Office in each county where you have resided for the last five (5) years

If the Court determines at the hearing that all of the requirements of the name change statute have been met, the Court may order the name change. You will receive a certified copy of the order from the Prothonotary's Office after you pay the required fee to the Prothonotary's Office (see Prothonotary's Fee Schedule) (payable by cash, certified check or money order made payable to Dauphin County Prothonotary).

FORMS

ADULT NAME CHANGE PETITION

PLEASE PRINT CLEARLY

***IT IS STRONGLY RECOMMENDED THAT YOU
CONSULT AN ATTORNEY***

DISCLAIMER

THE SELF HELP CENTER STAFF AND THE STAFF IN ANY COURT OFFICE ARE NOT PERMITTED TO GIVE YOU LEGAL ADVICE. THE INFORMATION IN THIS PACKET IS NOT A SUBSTITUTE FOR PROFESSIONAL LEGAL ADVICE. THE COURT ASSUMES NO RESPONSIBILITY AND ACCEPTS NO LIABILITY FOR ACTIONS TAKEN BY USERS OF THESE DOCUMENTS, INCLUDING RELIANCE ON THEIR CONTENTS. IF YOU WANT TO OBTAIN THE SERVICES OF AN ATTORNEY BUT DO NOT KNOW WHOM TO CONTACT, YOU MAY CALL THE DAUPHIN COUNTY LAWYER REFERRAL SERVICE AT (717) 232-7536.

IN RE: NAME CHANGE

: IN THE COURT OF COMMON PLEAS
: DAUPHIN COUNTY, PENNSYLVANIA

(Your Present Name)

:
:
:
:
: _____ CV _____ NC

COURT ORDER

AND NOW, this _____ day of _____, 20____, it is hereby ordered that the Hearing for the above-captioned name change matter is scheduled for

_____, 20____ at _____ a.m./p.m. in

_____.

YOU (PETITIONER) MUST READ THIS ENTIRE ORDER AND COMPLY WITH ALL OF THE FOLLOWING REQUIREMENTS

IT IS FURTHER ORDERED THAT:

1. You (Petitioner) must publish Notice of the Hearing by one (1) publication in **both** the *Dauphin County Reporter* **AND** in a newspaper of general circulation in Dauphin County, Pennsylvania **at least two** (2) weeks **prior** to the date of the hearing. You (Petitioner) should **immediately** go to a newspaper of general circulation in Dauphin County **AND** the Dauphin County Bar Association (213 North Front St., Harrisburg, PA) upon receipt of this Order to publish this Notice. The deadline for advertising in the Dauphin County Reporter is 12:00 noon on Tuesday for publication on Friday. **You (Petitioner) MUST submit written proofs of publications at the Hearing; AND**

2. No more than 48 hours **prior** to the scheduled Hearing date, You (Petitioner) must obtain a Proper Certification from the Dauphin County Prothonotary's Office or similar public office of any other county where You (Petitioner) lived within the past five years¹, verifying that there are no judgments, decrees of record or any other public records of like character filed against the You (Petitioner). **You (Petitioner) MUST bring the Certification(s) to the Hearing.**

BY THE COURT:

Distribution:

Petitioner's Name and Address

Court Administration
Judge's Chambers

¹ In any instance in which a certification is required from another county in this Commonwealth or any foreign jurisdiction, the date of such certification shall be subsequent to the date of the original Petition filed in this Court.

Notice of Language Rights



Language Access Coordinator
Dauphin County Court of Common Pleas
101 Market Street, 3rd Floor Court Administrator's Office
Harrisburg, PA 17101

interpreterrequest@dauphincounty.gov / (717) 780-6640

English: You have the right to an interpreter at no cost to you. To request an interpreter, please inform court staff using the contact information provided at the top of this notice.

Spanish/Español: Usted tiene derecho a un intérprete libre de costo. Para solicitar un intérprete favor de informárselo al personal judicial utilizando la información provista en la parte superior de este aviso.

Mandarin/Cantonese Simplified Chinese/普通话/粤语简体中文: 您有权获得免费的口译员服务。若需要口译员，请使用本通知上方提供的联系信息通知法院工作人员。

Mandarin/Cantonese Traditional Chinese/普通話/廣東話繁體中文: 您有權要求免費傳譯服務。如欲要求傳譯服務，請參閱本通知頂部的聯絡資料，通知法庭職員。

العربية/Arabic: بحق لك الحصول على مترجم دون دفع أي تكلفة من جانبك. لطلب مترجم، يُرجى إعلام موظفي المحكمة باستخدام معلومات الاتصال المقدمة في الجزء العلوي من هذا الإشعار.

Russian/Русский: У вас есть право на бесплатные услуги переводчика. Заявка на переводчика подается в суд по адресу, телефону или эл. почте, указанным выше в заголовке этого уведомления.

Vietnamese/Tiếng Việt: Quý vị có quyền được một thông dịch viên giúp mà không tốn chi phí nào cả, xin hãy báo cho nhân viên tòa án dùng thông tin liên lạc có ở trên đầu thông báo này.

Nepali/नेपाली: तपाईंको निःशुल्क रूपमा भाषा अनुवादक राख्न पाउने अधिकार छ। अनुवादकको लागि अनुरोध गर्न, यस सूचनाको माथि दिइएको सम्पर्क जानकारी भन्ने अदालतका कर्मचारीहरूलाई जानकारी दिनुहोस्।

Korean/한국어: 귀하는 비용에 대한 부담 없이 통역 서비스를 받을 권리가 있습니다. 통역 서비스를 요청하려면 본 통지서의 상단에 기재된 연락처를 통해 법원 직원에게 알려주세요.

Polish/Polski: Ma Pan/Pani prawo do nieodpłatnego skorzystania z usług tłumacza ustnego. Aby zwrócić się o wsparcie ze strony tłumacza ustnego, proszę skontaktować się z pracownikami sądu, korzystając z danych znajdujących się w górnej części niniejszego dokumentu.

Pakistan/پنجابی/Punjabi: تہاڈے کول بغیر ادائیگی کیتیاں اک مترجم حاصل کرن دا حق اے۔ مترجم دی درخواست کرن لئی، میربانی کر کے ایس نوٹس دے اوتے فراہم کیتیاں رابطے دیاں معلومات نوں ورتدیاں عدالت دے عملے نوں اطلاع دوو۔

Punjabi/ਪੰਜਾਬੀ/India: ਤੁਹਾਨੂੰ ਇਕ ਦੁਬਾਸੀਆ ਹਾਸਲ ਕਰਨ ਦਾ ਹੱਕ ਹੈ, ਜਿਸ ਦੀ ਤੁਹਾਨੂੰ ਕੋਈ ਲਾਗਤ ਨਹੀਂ ਲੱਗੇਗੀ। ਦੁਬਾਸੀਏ ਲਈ ਬੇਨਤੀ ਕਰਨ ਵਾਸਤੇ, ਕਿਰਪਾ ਕਰ ਕੇ ਅਦਾਲਤ ਦੇ ਅਮਲੇ ਨੂੰ ਜਾਣੂ ਕਰਵਾਓ ਤੇ ਇਸ ਲਈ ਇਸ ਨੋਟਿਸ ਦੇ ਸਿਖਰ ਉਤੇ ਦਿੱਤੀ ਸੰਪਰਕ ਜਾਣਕਾਰੀ ਦਾ ਇਸਤੇਮਾਲ ਕਰੋ।

Portuguese/Português: Você tem direito a um intérprete gratuitamente. Para solicitar um intérprete, informe à nossa equipe usando os dados de contato mostrados na parte superior deste aviso.

Somali/Somaali: Waxaad xaq u leedahay in lagu turjumo lacag la'aan ah. Si aad u codsato turjumaanka, fadlan u sheeg maxkamadda shaqaalaha adiga oo isticmaala macluumaadka ciwaanka kor lagu siiyay ee ogeysiiskaan.

Haitian Creole/Kreyòl Avisyen: Ou gen dwa resevwa sèvis yon entèprèt gratis. Pou mande pou yon entèprèt, tanpri fè manm pèsonèl tribinal la konnen lè ou sèvi avèk enfòmasyon an yo te bay ou nan tèt avi sa a.

French/Français : Vous avez le droit de bénéficier gratuitement de l'assistance d'un interprète. Pour en faire la demande, veuillez en informer le personnel du tribunal à l'aide des coordonnées indiquées en haut de page.

Revised 5-22-2024

© Dauphin County Court of Common Pleas

Name: _____
(Your present name)

Address: _____
(Your Complete Address)

City: _____, PA Zip: _____

Phone: _____

Email: _____

IN RE: NAME CHANGE OF _____ : IN THE COURT OF COMMON PLEAS
(YOUR PRESENT NAME) : DAUPHIN COUNTY, PENNSYLVANIA
: :
: NO. _____ CV _____ NC
: :

PETITION FOR CHANGE OF NAME

TO THE HONORABLE JUDGES OF SAID COURT:

The Petition of _____ represents:
(Your present name)

1. Petitioner is _____, who resides at:
(Your present name)

(Your complete address)

2. Petitioner's year of birth is _____. Petitioner's birth certificate number is _____
(Year of Birth) and was born at _____
(Birth Certificate Number) (City, Township, or Borough AND State or Country of Birth)

3. Petitioner has resided at the following addresses for the five (5) years prior to the filing of this Petition:

(Complete addresses of all places you have resided for the past five (5) years)

4. Petitioner desires and intends to change his/her name to:

(Name that you desire)

5. Petitioner provides the following reasons for this request:

(State in detail why you want to change your name)

6. The proposed change in Petitioner's name, if granted, will not be detrimental to the interests of any other person and is not against public interest.

7. The Petition is not filed to defraud creditors.

8. WHEREFORE, Petitioner requests the Court, pursuant to the Act of December 16, 1982, P.L. 1309, No. 295 § 2, 54 Pa.C.S. § 701, for the following:

- a. to fix a hearing on this Petition;
- b. to direct that notice be given on this Petition and hearing; and
- c. to enter a decree changing the Petitioner's name from

_____ to _____
(Complete Present Name) (Complete Proposed New Name)

SIGNATURE OF PETITIONER (Present name)

Print Present Name of Petitioner

VERIFICATION

I, _____, verify that the facts set
(Your present name)
forth in the PETITION FOR CHANGE OF NAME are true and correct to the best of my knowledge, information and belief. I understand that the statements herein are made subject to the penalties of 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities.

Date

Signature of Petitioner (Present name)

Print Present Name of Petitioner

CERTIFICATION

I, _____, certify that this filing complies with the
(Your present name)
provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

Date

Signature of Petitioner (Present name)

Print Present Name of Petitioner

IN RE: CHANGE OF NAME OF _____ : IN THE COURT OF COMMON PLEAS
(YOUR PRESENT NAME) : DAUPHIN COUNTY, PENNSYLVANIA
: NO: _____ CV _____ NC
:
:
:

DECREE FOR CHANGE OF NAME

AND NOW, this _____ day of _____ 20____, following a hearing on _____ before this Court, and it having been determined that the requirements of 54 Pa.C.S.A. § 701 have been satisfied, it is hereby ORDERED and DECREED that the name of Petitioner _____, whose year of birth is _____ and place of birth is _____ is hereby changed to _____ and that Petitioner, from this date forward, shall exclusively use and be known by the name of _____.

BY THE COURT:

JUDGE

DISTRIBUTION:

Petitioner's Name and Address

IN RE: NAME CHANGE OF

: IN THE COURT OF COMMON PLEAS
: DAUPHIN COUNTY, PENNSYLVANIA

Your Present Name

:
:
:
: NO. _____ CV _____ NC

ENTRY OF APPEARANCE AS A SELF-REPRESENTED PARTY
In ADULT NAME CHANGE

1. I am the Petitioner in the above-captioned case and have chosen to represent myself.
2. My complete address for the purpose of this case and for serving me with all future pleadings and other legal notices is:

I understand that this address will be the only address to which notices and pleadings in this case will be sent, and that I am responsible to regularly check my mail at this address to ensure that I know of important deadlines or scheduled proceedings.

This is my home address. This is not my home address.

3. My telephone number where I can be reached during normal business hours (8:00 a.m. – 4:30 p.m. Monday – Friday) is _____. My email address is: _____.

My telephone number and email address are confidential pursuant to a Protection From Abuse Order.

4. **I UNDERSTAND I MUST FILE A NEW FORM EVERY TIME MY ADDRESS OR TELEPHONE NUMBER CHANGES.**

5. I fully understand that by deciding to represent myself, the Court will hold me to the same standards of knowledge regarding the statutory law, evidence law, Local and State Rules of Procedure and applicable case law as a Pennsylvania licensed attorney, and that I must be fully prepared to meet those responsibilities.

I verify that the statements made in this Entry of Appearance as a Self-Represented Party are true and correct. I understand that if I make false statements herein, that I am subject to the criminal penalties of 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities which could result in a fine and/or prison term.

Date

Signature (Present Name)

CERTIFICATION

I, _____, certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

Date

Signature of Petitioner (Your Present Name)