How to request a name change in Illinois -- Supplement

This supplement includes a forms guide as well as forms. The forms guide is for use only in filling out the forms. For more information about what these forms mean or are used for, consult the appropriate Self Help packet.

Forms that are included in this supplement:

Application To Sue As A Poor Person

Motion to Waive Publication Costs

Order Waiving Publication Costs

Notice of Filing Of Petition For Change of Name

Petition For Change of Name

Order For Change of Name

Letter to Newspaper

FORMS GUIDE

ALL FORMS:

At the top of each form is the "caption". It is completed as follows:

STATE OF ILLINOIS

IN THE CIRCUIT COURT OF THE **(number of circuit)** JUDICIAL CIRCUIT

(name of county) COUNTY

IN RE THE MATTER OF:	)	
	)	
(your name)	)	No. **(get from the clerk at the time you file)**
	)	
	)	

Determine the number of the "Circuit" according to the chart on the next page. If your county does not appear in the chart, call the Circuit Clerk in the county in which you will be filing your case and ask for the number of the Circuit.

Circuit Courts in Illinois

Cook County is its own judicial circuit. The rest of the counties in Illinois fall into one of 22 circuits.

First Circuit -	The counties of Alexander, Pulaski, Massac, Pope, Johnson, Union, Jackson, Williamson and Saline.
Second Circuit -	The counties of Hardin, Gallatin, White, Hamilton, Franklin, Wabash, Edwards, Wayne, Jefferson, Richland, Lawrence and Crawford.
Third Circuit -	The counties of Madison and Bond.
Fourth Circuit -	The counties of Clinton, Marion, Clay, Fayette, Effingham, Jasper, Montgomery, Shelby and Christian.
Fifth Circuit -	The counties of Vermilion, Edgar, Clark, Cumberland and Coles.
Sixth Circuit -	The counties of Champaign, Douglas, Moultrie, Macon, DeWitt and Piatt.
Seventh Circuit -	The counties of Sangamon, Macoupin, Morgan, Scott, Greene and Jersey.
Eighth Circuit -	The counties of Adams, Schuyler, Mason, Cass, Brown, Pike, Calhoun and Menard.
Ninth Circuit -	The counties of Knox, Warren, Henderson, Hancock, McDonough andFulton.
Tenth Circuit -	The counties of Peoria, Marshall, Putnam, Stark and Tazewell.
Eleventh Circuit -	The counties of McLean, Livingston, Logan, Ford and Woodford.
Twelfth Circuit -	The county of Will.
Thirteenth Circuit	The counties of Bureau, LaSalle and Grundy.
Fourteenth Circuit -	The counties of Rock Island, Mercer, Whiteside and Henry.
Fifteenth Circuit -	The counties of JoDaviess, Stephenson, Carroll, Ogle and Lee.
Sixteenth Circuit -	The counties of Kane, DeKalb and Kendall.
Seventeenth Circuit -	The counties of Winnebago and Boone.
Eighteenth Circuit -	The county of DuPage.
Nineteenth Circuit -	The counties of Lake
Twentieth Circuit -	The counties of Randolph, Monroe, St. Clair, Washington and Perry.
Twenty-first Circuit -	The counties of Iroquois and Kankakee.
Twenty-Second Circuit-	The county of McHenry

FORM: Application to Sue as a Poor Person

Introduction: Your name

Paragraph 1: Your address, include street and city.

Paragraph 2: The amount and source of your income, for example, $339.00 per month in AFDC, supplemented by Food Stamps.

Paragraph 3:. List other sources of income not listed in 2.

Paragraph 4: The amount of income you had in the last year.

Paragraph 5: Should be the same as 2, unless you expect your income to go up or down, in which case you should list what you expect your income to be.

Paragraph 6: List the names and birthdates of your children and/or others you support financially.

Paragraph 7:

First blank: total value of your possessions;

Second blank: year and make of your car; if you do not have a car, simply put "none";

Third blank: value of your car;

***Before** you sign your name on the blank line where it says “Plaintiff” you will need to locate a notary public to watch you sign the form. Notary publics can probably be found at the Circuit Clerk’s Office or at your local bank. Make sure you bring identification with you so that the notary can verify that you are the person you claim to be in the document.

FORM: Motion to Waive Publication Costs **(use only if you want to apply for a waiver of the costs of publication)**

First blank: Your name.

Second blank: Name of county in which you filed your case.

Sign your name on both blank lines next to where it says "Plaintiff" and print your name below each signature.

FORM: Order Waiving Publication Costs **(use only if you are submitting the Motion To Waive Publication Costs)**

First blank: Name of county in which your case is filed.

DO NOT FILL IN THE DATE OR THE SIGNATURE LINE FOR THE JUDGE.

FORM: Notice of Filing of Petition For Name Change

First blank: Put the date on which you have set the hearing for date when the Court will consider your Petition For Change of Name. Remember when you select it that this date must be at least 6 weeks after the date the Notice appears in the newspaper and you should allow an extra 2 weeks from the date of your request to the newspaper for the Notice to actually appear in the newspaper for the first time. List the day, month, and year of the scheduled hearing.
Second blank: Your present full name (first, middle, last)
Third blank: The new name you want the court to give you. (first, middle, last)
Fourth blank: Name of the city in which the courthouse is located. **Sign** the form above where it says Plaintiff and put the **date** you signed the form above where it says DATE.

FORM: Letter to Newspaper

First blank: Name and address of newspaper in your town or county.
Second blank: Your case name. (In Re your current name)
Third blank: Your case number (the number assigned by the Clerk of Court when you filed your Petition (for example 96-D-67)

( ) Paragraphs: If your Motion To Waive Publication Costs was denied or you did not ask for a waiver then put a check in the first set of brackets ( ) for the newspaper to bill you for running the notice. If your Motion To Waive Publication Costs was approved, put a check in the second set and list the name of the county in which your case was filed in the first two blanks and the name of the city in which the courthouse is located in the third blank for the newspaper to bill the Treasurer.

Sign your name and print your name, address, and telephone number where you can be reached.

Don't forget to include a self-addressed, stamped envelope.

FORM: Order For Change of Name

First blank: Your present full name (first, middle, last)
Second blank: The new name you want the court to give you. (first, middle, last)
DO NOT FILL IN THE DATE OR THE SIGNATURE LINE FOR THE JUDGE.

FORM: Petition For Change of Name

First blank: Your name. **Second blank (paragraph 2):** Your age in years. **Third blank (paragraph 3):** Your address including city and state. **Fourth blank (paragraph 4):** The date when you began living in the state of Illinois (if you have lived in the state for more than one time period list the date you began the current period; temporary absences where you did not intend to make another state your residence do not count as an interruption). **Fifth blank (paragraph 7):** Check off the blank stating that you have never been convicted of a felony if that is the case; if you have been convicted of a felony in Illinois or another state, check off the condition that applies (pardoned or that ten or more years have passed since completion and discharge). **Sixth blank (paragraph 8):** The state in which you were born. If you were not born in the United States, put the country. **Seventh blank (paragraph 9):** Your present full name (first, middle, last)
Eighth blank (paragraph 10): The new name you want the court to give you. (first, middle, last) **Sign** your name on both blank lines next to where it says "Plaintiff" and print your name below each signature.

STATE OF ILLINOIS

IN THE CIRCUIT COURT OF THE _____JUDICIAL CIRCUIT

_____COUNTY

IN RE THE MATTER OF:	)	_____Application granted
	)	_____Application denied
_____	)	
	)	
	)	
	)	
	)	No._____
	)	
	)	_____, 20___
	)	

APPLICATION TO SUE AS A POOR PERSON

I, _____, on my own behalf, on oath state:

1. My current address is _____

_____.

2. My occupation, source of income, amount of public benefits is _____

_____.

3. My other sources of income or support are _____.

4. My income for the preceding year was approximately _____.

5. The sources and amounts of income I expect to receive in the future are:

_____.

6. Person(s) who are dependent on me for support are: _____

_____

_____.

7. I own no real estate. The total value of all my personal property does not exceed $_____ in value and consists of clothing and furniture, and other household items, including a 20____, _____ motor vehicle, valued at $_____.

8. I filed no applications for leave to sue or defend as a poor person during the preceding year, and none were filed on my behalf.

9. I am unable to pay the costs of commencing and prosecuting this action.

10. I have a meritorious claim.

WHEREFORE, Applicant prays the Court to permit her/him to commence and prosecute this action as a poor person under 735 ILCS 5/5-105 of the Code of Civil Procedure.

_____
Plaintiff

STATE OF ILLINOIS }
} SS.
COUNTY OF _____ }

I, the undersigned, a Notary Public, in and for said County, in the State aforesaid, do hereby certify that _____, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me this day in person and acknowledged that he/she signed, sealed, and delivered the said instrument as a free and voluntary act, for the uses and purposes therein set forth.

Given under my hand and notarial seal this _____ day of _____, 20___.

_____
NOTARY PUBLIC

STATE OF ILLINOIS

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT

_____ COUNTY

IN RE THE MATTER OF:	)	
	)	
_____	)	
	)	NO. _____
	)	

MOTION TO WAIVE PUBLICATION COSTS

I, _____, state the following facts are true:

1. I have filed an Application to Sue as a Poor Person, which lists my income, resources and assets.

2. An order was entered by this Court which allowed me to pursue this action without payment of costs.

3. Illinois case law recognizes that publication costs of persons like myself are a local obligation and that service by publication is a constitutional right under due process of law. King v. King, 21 Ill. App.3d 1062, 316 N.E.2d 555 (4th Dist. 1974).

WHEREFORE, I ask that the Court waive publication costs and order the _____ County Treasurer to pay the costs of publication to the newspaper which publishes the required Notice of Filing of Petition For Change of Name.

_____, Plaintiff

Under penalties as provided by law pursuant to Section 5/1-109 of the Code of Civil Procedure, the undersigned certifies that the statements set forth in this instrument are true and correct, except as to matters therein stated to be on information and belief and as to such matters the undersigned certifies as aforesaid that she/he verily believes the same to be true.

_____, Plaintiff

STATE OF ILLINOIS

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT

_____COUNTY

IN RE THE MATTER OF:)
)
_____)
)
) NO._____
)
)
)

ORDER WAIVING PUBLICATION COSTS

The Court, having considered the Motion to Waive Publication Costs filed herein by Plaintiff and having previously allowed Plaintiff to pursue this action as a poor person, finds that Plaintiff is indigent.

IT IS HEREBY ORDERED that the Clerk of the Circuit Court shall cause publication to be made on behalf of Plaintiff and the Treasurer of _____ County pay costs of publication upon presentation of a statement by the newspaper wherein such notice was published and upon filing and allowance of claim. The County Treasurer shall pay for such necessary and proper expenses pursuant to 55 ILCS 5/ 5-1106.

DATE:_____ ENTER:_____
JUDGE

STATE OF ILLINOIS
IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT
_____ COUNTY

IN RE THE MATTER OF:	)	
	)	
_____	)	No. _____
	)	
CHANGE OF NAME TO:	)	
	)	
_____	)	

NOTICE OF FILING OF PETITION FOR CHANGE OF NAME

Notice is given you, the public, that on _____, a hearing will be held on a Petition for Change of Name asking the Court to change my present name of _____ to the name of _____. The hearing will take place at _____ in _____, Illinois.

DATE_____ PLAINTIFF _____

STATE OF ILLINOIS
IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT
_____ COUNTY

IN RE THE MATTER OF:	)	
	)	
_____	)	No. _____
	)	
CHANGE OF NAME TO:	)	
	)	
_____	)	

PETITION FOR CHANGE OF NAME

I, _____, without the assistance of counsel, ask this Court to enter an order for change of name in compliance with 735 ILCS 5/21-101 et. seq. In support of my Petition, I state the following items are true:

1. This Court has jurisdiction over the subject matter and my person.
2. I am ____ years of age.
3. My current address is _____.
4. I have lived in Illinois since _____.
5. I have never been convicted of criminal sexual abuse of a minor, sexual exploitation of a child, indecent solicitation, or any other crime which would require registration as a sex offender in this or any other state.
6. I have never been convicted of identity theft or aggravated identity theft in this or any other state.
7. I have _____ never been convicted of a felony in this or any other state; I was convicted of a felony but _____ was pardoned _____ ten years or more years have passed since completion and discharge of my sentence.
8. The state/country of my birth is _____.
9. My current full name is _____.
10. The new name which I would like the Court to give me is _____ _____.

I hereby certify, under penalties as provided by law pursuant to Section 5/1-109 of the Code of Civil Procedure, that all statements set forth in this petition are true and correct to the best of my knowledge and belief.

WHEREFORE, I request that the Court grant my Petition for a Change of Name.

_____
Signature of Petitioner

AFFIDAVIT OF NON-PETITIONING WITNESS

I, _____ affirm under oath that I am acquainted with the petitioner _____.

I have read and understood the contents of this petition, and affirm that all statements therein are true and correct to the best of my knowledge and belief.

_____
Signature of Witness

Subscribed and sworn before me on this _____ day

of _____, the year _____

_____
Notary Public

STATE OF ILLINOIS

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT

_____ COUNTY

IN RE THE MATTER OF:	)	
	)	
_____	)	NO._____
	)	
	)	
	)	

ORDER FOR CHANGE OF NAME

The Court, having considered the Petition for Change of Name filed herein by Plaintiff, heard the evidence, and being otherwise fully advised in the premises, finds that it should be granted.

IT IS HEREBY ORDERED that the Plaintiff's name of _____, is hereby changed to: _____, by which he shall be hereafter known and called.

DATE:_____ ENTER: _____
JUDGE

LETTER TO NEWSPAPER

DATE: _____

_____ Newspaper
_____
_____

Dear Sir or Madam:

Re: _____,Case number: _____

Enclosed you will find a Notice to File Petition For Change of Name in the above referenced case. Please run this Notice once a week for 3 weeks. After publication has been completed, please send the Certificate of Publication to me in the enclosed self addressed stamped envelope.

( ) Please bill me for the cost of publication. If you have any questions, please feel free to contact me.

( ) Please bill the office of the Treasurer in _____ County, _____ County Courthouse, _____, Illinois for the cost of publication. I have enclosed a court order requiring the Treasurer to pay the cost of publication in my case. If you have any questions, please fell free to contact me.

I thank you for your cooperation

Sincerely,

_____
_____
_____