

**State of Minnesota**

County \_\_\_\_\_

**District Court**

Judicial District: \_\_\_\_\_  
Court File Number: \_\_\_\_\_  
Case Type: **Name Change**

In the Matter of the Application of:

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

For a change of name to:

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

**Inmate Affidavit for  
Name Change  
(Minn. Stat. § 259.12)**

STATE OF MINNESOTA )  
 ) ss.  
COUNTY OF \_\_\_\_\_ )  
(County where Affidavit signed)

I, \_\_\_\_\_, the applicant in this matter, make the following statement under oath:

- I am currently an inmate confined in a correctional facility, as defined in section 241.021, subdivision 1(f).
- I have not at any time during my confinement requested a name change under section 259.10, other than this request.
- The reason I am seeking a name change is: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I request the court to issue its Order Granting Name Change.

Dated: \_\_\_\_\_

Subscribed and sworn to before me

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

\_\_\_\_\_  
Notary Public \ Deputy Court Administrator

\_\_\_\_\_  
Signature (Sign only in front of notary public or court administrator.)

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_