

# **ASHLAND COUNTY PROBATE COURT** **ADULT NAME CHANGE INSTRUCTIONS**

NOTE: Pursuant to Sections 2101.41; 2101.99(c) and 4705.01 of the Ohio Revised Code, Probate Court staff CANNOT give legal advice. The completion of the required documents is the sole responsibility of the applicant requesting the name change. If the applicant chooses, they may use an attorney at their expense.

1. Obtain a certified copy of your birth certificate. This must be attached to your Application.
2. Make sure you are filing in the right Court. You must be a current resident of Ashland County and you must have resided in Ashland County for at least sixty (60) days prior to filing your Application for Name Change to file in this Court.
3. Complete all forms completely and legibly. The Court prefers that you use the PDF forms available on the Court's webpage and the Supreme Court's webpage, so that you can type the forms. Never use pencil to complete documents. The forms you must complete include:
  - Supreme Court Probate Form 21.0 Application for Change of Name of Adult
  - Supreme Court Probate Form 21.01 Affidavit in Support of Application for Change of Name of Adult
  - Supreme Court Probate Form 21.03 Judgment Entry Setting Hearing and Ordering Notice (complete top portion only)
  - Local Form Name Change Application Supplemental Affidavit (page 2 of these instructions)
  - Supreme Court Probate Form 21.1 Judgment Entry Change of Name of Adult (complete top portion only)
  - Supreme Court Probate Form 21.5 Notice of Hearing on Change of Name (complete everything except hearing date)
4. Execute any required notarized forms in front of a Notary Public. The Court will not notarize your signature on your documents, so this must be done before you file your documents with the Court.
5. Bring your forms to the Court for filing. If you want to keep a date-stamped copy of your documents for your records, also bring a copy for yourself. Once at the Court, you will need to pay the filing fee shown on the schedule of court costs on the Court's webpage.
6. The Court will schedule a hearing on your application. You must fill this hearing date in on Supreme Court Probate Form 21.5 . You are responsible for making sure that the Notice of Hearing on Change of Name is properly published once at least thirty (30) days before the hearing. After the publication, you must file the Affidavit of Publication by the newspaper with the Court documenting that the publication was done. You must pay any cost of publication of the notice.
7. Attend the hearing. If your application is granted, you will receive a copy of Supreme Court Probate Form 21.1 signed by the Judge.

\*\*\* A LEGAL NAME CHANGE WILL NOT CHANGE A BIRTH CERTIFICATE\*\*\*\*

IN THE PROBATE COURT OF ASHLAND COUNTY, OHIO  
JUDGE KAREN DESANTO KELLOGG

IN RE: CHANGE OF NAME OF \_\_\_\_\_ (Current Name)  
TO \_\_\_\_\_ (Requested Name)  
Case No. \_\_\_\_\_

**Name Change Supplemental Affidavit - Adult Name Change**

After being duly cautioned and sworn, the undersigned states as follows:

1. I am over the age of 18.
2. I am currently a resident of Ashland County, Ohio and I have been a resident of Ashland County, Ohio since \_\_\_\_\_.
3. The addresses and dates of my residence at those addresses during the previous two (2) years is as follows:

From and To:	Address:

4. I am requesting a change of name for the following reason(s):

5. The outstanding amounts that I owe on credit cards, bills and overdue payments is:

Amount(s)	Owed To:

IN RE: CHANGE OF NAME OF \_\_\_\_\_  
Page 2 of Name Change Supplemental Affidavit

- 6. I \_\_\_ do \_\_\_ do not have a duty to comply with the Sexual Offender Registration and Notification (SORN) law because of having been convicted of, pleading guilty to, or being adjudicated a delinquent child for having committed a sexually oriented offense or a child-victim offense, as both are defined in R.C. 2950.01.
- 7. I \_\_\_ have \_\_\_ have not been convicted of, pleaded guilty to, or been adjudicated a delinquent child for having committed identity fraud as defined in R.C. 2913.49.
- 8. I \_\_\_ am \_\_\_ am not in arrears or delinquent in the payment of any governmentally owed child support.

Signature: \_\_\_\_\_  
Printed Name: \_\_\_\_\_

State of Ohio :  
: ss.  
County of \_\_\_\_\_:

Sworn to or affirmed and subscribed before me by \_\_\_\_\_  
on \_\_\_\_\_.

(Notary seal)

\_\_\_\_\_  
Notary Public  
My commission expires: \_\_\_\_\_