

# PREFERRED LEGAL SERVICES

## NAME CHANGE WORKBOOK

- Please read the instructions carefully and answer each question according to the instructions.
- If a question is optional and/or does not apply to your situation, you must write "NA" or draw a line above the answer blank.
- Please print legibly in black or blue ink. Only your written answers will be typed into the documents.
- Answers that go beyond the scope of the workbook will not be typed and may cause delays.
- Changes requested after your documents have been typed and prepared may result in additional charges.

**Present Name:** \_\_\_\_\_

**Proposed Name:** \_\_\_\_\_

**Full Address:** \_\_\_\_\_

**Phone:** (    ) \_\_\_\_\_ **Driver's license or ID #** \_\_\_\_\_

**I am a resident of** \_\_\_\_\_ **County, Nevada and I am over 18 years of age.**

**How long have you lived at your current residence?** \_\_\_\_\_

**Date of birth:** \_\_\_\_\_ **Place of birth:** \_\_\_\_\_

**How long have you been a resident of Nevada?** \_\_\_\_\_

**List your full previous address:** \_\_\_\_\_

**How long did you reside there?** \_\_\_\_\_

**This name change is for**     **Adult**     **Minor**

**Minor Name (if applicable):** \_\_\_\_\_

**Minor Proposed Name:** \_\_\_\_\_

**Please state the reason for the name change:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Names of applicant's biological parents (ONLY REQ. IF APPLICANT IS A MINOR)**

**Mother's Name:** \_\_\_\_\_

**Father's Name:** \_\_\_\_\_

**Is other parent willing to sign a consent for the name change?** \_\_\_\_\_

**Were your parents married at the time of your birth? Yes \_\_\_\_\_ No \_\_\_\_\_**

**If you are changing the name of your child, you must give notice to the child's other parent. Please list his or her name and address.**

**Parent name:** \_\_\_\_\_

**Parent's full address:** \_\_\_\_\_

**Would you like a new birth certificate to be issued showing your new name as your original name? Yes \_\_\_\_\_ No \_\_\_\_\_**