

<input type="checkbox"/> County Court <input type="checkbox"/> District Court _____ County, Colorado Court Address:  <b>In the Matter of the Petition of:</b>  <b>For a Change of Name to:</b>	
Attorney or Party Without Attorney (Name and Address):  Phone Number:                      E-mail: FAX Number:                        Atty. Reg. #:	<b>▲ COURT USE ONLY ▲</b> Case Number:  Division                                  Courtroom
<b>PETITION FOR CHANGE OF NAME (ADULT)</b>	

1. My current full name is \_\_\_\_\_  
  First Name                                  Middle Name                                  Last Name
  
  2. I wish to change my name to \_\_\_\_\_  
  First Name                                  Middle Name                                  Last Name
  
  3. My date of birth is \_\_\_\_\_.
  
  4.  I am 18 years of age or older.
  
  5. I am a resident of \_\_\_\_\_ County.
  
  6.  I have not been convicted of a felony or adjudicated a juvenile delinquent for an offense that would constitute a felony if committed by an adult in this state or any other state or under federal law. My certified, fingerprint-based criminal history record check from the FBI is attached as Exhibit A and my certified, fingerprint-based criminal history record check from the CBI is attached as Exhibit B. Both are dated within 90 days of the filing of this Petition pursuant to §13-15-101(b), C.R.S.
  
  7. I am requesting a name change for the following reason(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
  8. The proposed change of name would be proper and not detrimental to the interest of any other person.
  9.  I ask the Court to order publication of my name change request as required by § 13-15-102, C.R.S.  
Or  
 Publication of my name change request is not required for the following reason(s): \_\_\_\_\_  
\_\_\_\_\_
- 
- By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.  
 By checking this box, I am acknowledging that I have made a change to the original content of this form.  
(Checking this box requires you to remove JDF number and copyright at the bottom of the form.)

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**VERIFICATION AND ACKNOWLEDGEMENT**

I ask the court to order the name change. I \_\_\_\_\_, swear/affirm under oath that I have read the foregoing Petition and that the statements contained in this Petition are true to the best of my knowledge.

\_\_\_\_\_  
(Printed name of Petitioner)

\_\_\_\_\_  
Signature of Petitioner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Telephone #: (home)

\_\_\_\_\_  
(work)

\_\_\_\_\_  
(cell)

Subscribed and affirmed, or sworn to before me in the County of \_\_\_\_\_, State of \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Deputy Clerk/Notary Public