

# COMPLETING THE NOTICE TO PARENT OF HEARING FOR THE NAME CHANGE OF A MINOR CHILD

Use this form to tell the other parent when the hearing for the children's name change is.

Page 1 of 2

Choose the county from the drop-down list.

Enter the children's CURRENT first, middle, and last name(s).

Enter your name.

Enter the children's CURRENT first, middle, and last name(s).

Enter the case number.

Enter your first, middle, and last name(s).

Enter the hearing information you received from the court clerk.

IN THE DISTRICT COURT OF \_\_\_\_\_ COUNTY, NEBRASKA  
Choose the county (county where Petition filed)

IN RE NAME CHANGE OF:  
\_\_\_\_\_  
(minor child(ren)'s current full name(s))

Case No. \_\_\_\_\_  
(case number assigned by clerk of court)

NOTICE TO PARENT OF  
HEARING FOR THE  
NAME CHANGE OF A  
MINOR CHILD

Minor Child(ren),  
By Parent or Guardian  
\_\_\_\_\_  
(your full name)

You are hereby notified that the hearing for the name change of:

_____ <small>(current first name)</small>	_____ <small>(current middle name(s))</small>	_____ <small>(current last name(s))</small>
_____ <small>(current first name)</small>	_____ <small>(current middle name(s))</small>	_____ <small>(current last name(s))</small>
_____ <small>(current first name)</small>	_____ <small>(current middle name(s))</small>	_____ <small>(current last name(s))</small>
_____ <small>(current first name)</small>	_____ <small>(current middle name(s))</small>	_____ <small>(current last name(s))</small>

minor child(ren), by the next friend,  
\_\_\_\_\_  
(first name) \_\_\_\_\_  
(middle name(s)) \_\_\_\_\_  
(last name(s))

will be heard before the Honorable \_\_\_\_\_, Judge of the  
(name of judge hearing your case)

District Court of \_\_\_\_\_ County, in courtroom no. \_\_\_\_\_ at  
(county where Petition filed) (courtroom number)

\_\_\_\_\_  
(court address where hearing will be held)

Page 2 of 2

Continue the hearing information you received from the court clerk.

on \_\_\_\_\_ at \_\_\_\_\_, or as soon thereafter as  
(month/day/year) (time of hearing)  
it may be heard.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
(of petitioner)  
Street Address/P.O. Box: \_\_\_\_\_  
City/State/ZIP Code: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Email address: \_\_\_\_\_

Sign and date the form. Enter your printed name, your address, telephone number, and your email address.

Enter the date mailed.

**CERTIFICATE OF SERVICE**

I hereby certify that on: \_\_\_\_\_, a true copy of the foregoing  
(date)

Notice to Parent was sent by certified mail to

\_\_\_\_\_  
(other parent's first name, middle name(s), and last name(s))

at \_\_\_\_\_

\_\_\_\_\_  
(other parent's street address, city, state and ZIP code)

Enter the other parent's first, middle, and last name(s), and the address you mailed the Notice to.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_  
(of petitioner)  
Street Address/P.O. Box: \_\_\_\_\_  
City/State/ZIP Code: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
Email address: \_\_\_\_\_

Sign and date the form. Enter your printed name, your address, telephone number, and your email address.