

**PETITION FOR  
NAME CHANGE (Adult)**

DC 6:9(1) Rev. 05/15  
Neb. Rev. Stat. § 25-21, 271

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

IN RE NAME CHANGE OF

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

\_\_\_\_\_  
(your full name)

**PETITION FOR NAME CHANGE  
(Adult)**

I, \_\_\_\_\_, without the assistance of an attorney,  
(your full name)

ask this court for a name change. In support of my Petition, I state that the following items are true:

1. My address is \_\_\_\_\_,  
(your present street address)

\_\_\_\_\_, \_\_\_\_\_ County, Nebraska.  
(city where you live) (county where you live)

2. I have been a resident of \_\_\_\_\_ County, Nebraska  
(county where you live )  
for more than one year prior to the filing of this petition.

3. My date of birth is provided on the Confidential Party Information Form (page 3 of the Petition for Name Change).

4. My current name is \_\_\_\_\_.  
(your current full name)

5. I desire the court to change my name of

\_\_\_\_\_ to \_\_\_\_\_.  
(your current full name) (preferred new full name)

6. I desire to change my name for the following reason(s):

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WHEREFORE, I respectfully request that the court set this matter for hearing,  
and that upon such hearing, order my name to be changed from

\_\_\_\_\_ to \_\_\_\_\_.  
(current full name) (preferred full name)

\_\_\_\_\_  
Petitioner's Signature (your signature) Date \_\_\_\_\_

\_\_\_\_\_  
Your Current Full Name

\_\_\_\_\_  
Your Full Street Address/P.O. Box

\_\_\_\_\_  
City/State/ZIP Code

\_\_\_\_\_  
Phone E-mail Address

**CONFIDENTIAL PARTY  
INFORMATION FORM FOR  
PETITION FOR NAME CHANGE**

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

**THIS DOCUMENT IS CONFIDENTIAL AND SHALL NOT BE  
MADE PART OF THE COURT FILE OR PROVIDED TO THE  
PUBLIC PURSUANT TO NEB. CT. R. § 6-1521.**

IN RE NAME CHANGE OF

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

\_\_\_\_\_  
(your full name)

**CONFIDENTIAL PARTY  
INFORMATION FORM**

**Name**

**Gender**

**Birth Date**

Petitioner:

\_\_\_\_\_  
(your current full name)

\_\_\_\_\_

\_\_\_\_\_