

COVER SHEET FOR CHANGING A CHILD'S NAME

The forms presented in this packet are designed to guide you in preparation of your Petition to Change Name of a CHILD(REN). You must type in the required information as it applies to your situation. Your papers should remain in the same order as they appear in this packet. Please type this document, or neatly print in black ink.

Do not fill in the civil action file number, because you will not have that until the Clerk assigns a number to your case. Make sure that everything is signed.

Neither the Clerk of the Superior Court, nor any Deputy Clerk, nor the Law Librarian, Judge, or any other Court personnel, is allowed to answer any questions for you concerning the preparation of these forms. State Law O.C.G.A. § 15-9-51 procedures and courthouse personnel cannot advise you how to proceed or what forms may be necessary in specific situations. The only person allowed to help you in the preparation of these forms is a licensed attorney hired to represent you. Please consult an attorney if you have any questions about the procedure of what action is best for you to take.

Remember, you must fully complete the forms and follow all instructions before the Judge will be able to grant your change of name. Incomplete forms, as well as, forms that are improperly filled out, may delay the grant of your change of name. Make sure that you take time to read over all the forms and instructions.

FILING INFORMATION FOR CHILD'S NAME CHANGE

Filing Fee:	\$218	We accept cash (no \$100 bills), debit/credit, money order,
Publication Cost:	\$ 80	or cashier's check (No Personal Checks)
YOUR TOTAL COST	\$298	

NOTE:

Once you have received the minor name change order, signed by the Judge, you must send (1) a certified copy of the order, (2) a money order for \$25, and (3) a color photocopy of your photo ID to:

**Georgia Department of Vital Records
1680 Phoenix Blvd. #100
Atlanta, GA 30349
404-679-4702**

**IN THE SUPERIOR COURT OF BIBB COUNTY
STATE OF GEORGIA**

In Re the Name Change of the Child(ren):

Civil Action No. _____

(Minor Child(ren))

PETITION TO CHANGE NAME(S) OF MINOR CHILD(REN)

The Plaintiff files this Petition to change Name(s) of Minor Child(ren) and shows the following in support of this petition:

1.

The Plaintiff's name is _____ and she/he
resides in _____ County, Georgia.

2.

The Plaintiff's relationship to the child(ren) is [Check only one box]:

☐ Mother

☐ Father

☐ Legal Guardian

3.

Check only one (1) box

a. ☐ The minor child(ren) live with the Plaintiff in _____
County, Georgia.

b. ☐ The minor children do not live with the Plaintiff, She/He/They live with
_____ (who is the
☐ Mother ☐ Father ☐ Legal Guardian)
in _____ County, Georgia.

4.

Plaintiff desires to change the name(s) of said minor child(ren) as follows:

Current Name of Child	Year of Birth	Proposed New Name

5.

The reasons for such change in name(s) are as follows:

6.

The mother of the child(ren) is named _____

Her address is _____

and she [Check one]:

- a. ☐ Has consented to this name change and has acknowledged service; the signed consent and acknowledgement of service shall be filed with this Petition.
- b. ☐ Is deceased.
- c. ☐ Abandoned the child(ren) on or about the ____ day of _____, 20__.

d. ☐ Has not contributed to the support of the child(ren) for a continuous period of as least five (5) years immediately preceding the filing of this Petition. The last date on which the mother paid child support was on the ____ day of _____, 20____.

7.

The father of the child(ren) is named _____.

His address is _____.

and he [Check one]:

- a. ☐ Has consented to this name change and has acknowledged service; the signed consent and acknowledgement of service shall be filed with this Petition.
- b. ☐ Is deceased.
- c. ☐ Abandoned the child(ren) on or about the ____ day of _____, 20____.
- d. ☐ Has not contributed to the support of the child(ren) for a continuous period of as least five (5) years immediately preceding the filing of this Petition. The last date on which the mother paid child support was on the _ day of _____, 20____.

8.

Check one

- a. ☐ There is no legal guardian for the child(ren), other than the parent(s).
- b. ☐ Both parents are deceased or have abandoned the child(ren), and the guardian of the child(ren) is _____, whose address is _____

and s/he has consented to this name change and the acknowledge services; the signed consent and acknowledgement of service shall be filed with this petition.

WHEREFORE, Plaintiff respectfully prays for the following:

- (a) That the name of the minor child(ren) be changed to the name(s) listed in Paragraph four (4) of this Petition.
[Check only one (1) of the following methods of service for each person who must be served. Read the instructions for service first.]
- (b) ☐ That the Sheriff's department personally serve the ☐ mother / ☐ father / ☐ person acting as guardian of the minor child(ren).

- (c) ☐ That the ☐ mother / ☐ father / ☐ person acting as the guardian of the minor child(ren) be served by certified mail, because they reside outside the State of Georgia.
- (d) ☐ That the court order service by publication for serve the ☐ mother / ☐ father / ☐ person acting as guardian for the minor child(ren) because the address(s) is/are unknown.
- (e) ☐ That the ☐ mother / ☐ father / ☐ person acting as the guardian for the minor child(ren) has signed a Consent and Acknowledgement of Service.
- (f) And such other relief as the Court deems necessary and proper.

Respectfully submitted, this _____ day of _____, 20____.

Plaintiff, Pro Se (Signature)

Printed Name: _____

Address: _____

Phone (day): _____

STATE OF GEORGIA

COUNTY OF BIBB

VERIFICATION

Personally appeared before the undersigned officer authorizes by law to administer oaths, the deponent herein, who, an oath, deposes and says that the facts contained in the foregoing document are true and correct.

Plaintiff

Sworn to and subscribed before me

this ____ day of _____, 20_____.

Notary Public

AFFIDAVIT FOR PERSON FILING CASE WITH NO ATTORNEY
(All questions must be answered.)

Plaintiff

vs.

Civil Action No. _____

Defendant

PERSONALLY appeared before me the undersigned officer, _____
(Affiant)

who after being duly sworn deposes and states under oath the following:

- (1) That affiant has this date filed a suit for divorce or other complaint in this County and does not have an attorney at law representing affiant.
- (2) (a) Affiant further states that the following person prepared the Complaint and/or other papers.

Name of Person (and business name) who prepared papers

Address of such person and business

Telephone number of such person and business

- (b) Affiant state that said person who prepared the paper (was/was not) paid to prepare the papers. The total amount paid \$_____.
- (3) Affiant further states that there (is/is not) any further money due anyone for assisting in the preparation of said papers. If affiant owes money to the preparer the amount is \$_____.
- (4) Affiant has not paid or given anyone any other consideration of money for helping in preparing the paper, except the following, _____.
- (5) Did the preparer of the papers tell you what information, or give you advice regarding the information to put in any of your paper? (YES / NO)
- (6) Did the preparer give you any advice about how to file your papers? (YES / NO)
- (7) Did the preparer give you any advice about how to present your case to the judge? (YES / NO)
- (8) Are you willing to discuss this matter with a State Bar or Georgia investigator? (YES / NO)

I have answered all the about questions truthfully, under criminal penalties of perjury.

Sworn to and subscribed before me
this _____ day of _____, 20____.

Affiant

Address

Notary Public

My Commission Expires _____

City State Zip

Phone No. (required): _____

SUPERIOR COURT OF BIBB COUNTY
PARTIES INFORMATION SHEET
TO BE FILED WITH COMPLAINT/PETITION

Plaintiff's Contact Information:

Plaintiff's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone Number: _____

Cell Phone Number: _____

Email Address: _____

Defendant's Contact Information:

Defendant's Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone Number: _____

Cell Phone Number: _____

Email Address: _____

General Civil and Domestic Relations Case Filing Information Form

☐ Superior or ☐ State Court of _____ County

For Clerk Use Only

Date Filed _____
MM-DD-YYYY

Case Number _____

Plaintiff(s)

Last	First	Middle I.	Suffix	Prefix
____	____	____	____	____
____	____	____	____	____
____	____	____	____	____
____	____	____	____	____

Defendant(s)

Last	First	Middle I.	Suffix	Prefix
____	____	____	____	____
____	____	____	____	____
____	____	____	____	____
____	____	____	____	____

Plaintiff's Attorney _____

Bar Number _____

Self-Represented ☐

Check One Case Type in One Box

General Civil Cases

- ☐ Automobile Tort
- ☐ Civil Appeal
- ☐ Contract
- ☐ Garnishment
- ☐ General Tort
- ☐ Habeas Corpus
- ☐ Injunction/Mandamus/Other Writ
- ☐ Landlord/Tenant
- ☐ Medical Malpractice Tort
- ☐ Product Liability Tort
- ☐ Real Property
- ☐ Restraining Petition
- ☐ Other General Civil

Domestic Relations Cases

- ☐ Adoption
- ☐ Dissolution/Divorce/Separate Maintenance
- ☐ Family Violence Petition
- ☐ Paternity/Legitimation
- ☐ Support – IV-D
- ☐ Support – Private (non-IV-D)
- ☐ Other Domestic Relations

Post-Judgment – Check One Case Type

- ☐ Contempt
 - ☐ Non-payment of child support, medical support, or alimony
- ☐ Modification
- ☐ Other/Administrative

- ☐ Check if the action is related to another action(s) pending or previously pending in this court involving some or all of the same parties, subject matter, or factual issues. If so, provide a case number for each.

Case Number

Case Number

- ☐ I hereby certify that the documents in this filing, including attachments and exhibits, satisfy the requirements for redaction of personal or confidential information in O.C.G.A. § 9-11-7.1.

- ☐ Is an interpreter needed in this case? If so, provide the language(s) required. _____
Language(s) Required

- ☐ Do you or your client need any disability accommodations? If so, please describe the accommodation request.

**IN THE SUPERIOR COURT OF BIBB COUNTY
STATE OF GEORGIA**

In Re the Name Change of the Child(ren):

Civil Action No.: _____

(Minor Child(ren))

NOTICE OF PETITION TO CHANGE NAME

I, _____, filed this petition
to the Superior Court of Bibb County, Georgia on the ____ day of _____,
20____, to change the name(s) of minor child(ren) as follows:

Current Name of Child	Year of Birth	Proposed New Name

Any interest or affected party has the right to appear in this case and file objection within thirty (30) days as set forth in O.C.G.A. § 19-12-1(f)(2) and (3).

This _____ day of _____, 20_____.

Plaintiff, Pro Se (Signature)

Printed Name: _____

Address: _____

Phone No.: _____

**IN THE SUPERIOR COURT OF BIBB COUNTY
STATE OF GEORGIA**

In Re the Name Change of the Child(ren):

Civil Action No. _____

(Minor Child(ren))

**CONSENT TO CHANGE NAME(S) OF MINOR CHILD(REN) and
ACKNOWLEDGEMENT OF SERVICE**

My name is _____. My address is

_____.

My relationship to the child(ren) in this action is [Check one box]:

☐ Mother ☐ Father ☐ Person acting as Guardian

I have received a copy of the Petition that was filed by _____
to change the name(s) of the child(ren) and I hereby give my consent to the name(s) being
changed as follows:

Current Name of Child	Year of Birth	Proposed New Name

3.

I consent to both jurisdiction and venue as states in the Petition. So long as any final order in this action is consistent with this consent form, then I waiver formal process, further notice, and my right to a hearing, and if I am on active duty in the Armed Forces, I also waive my rights under the Soldiers and Sailors Relief Act, 50 U.S.C § 521. I give my consent for the Court to hear this matter, as soon as possible, after thirty (30) days.

Should further notice be required for any reason, the notice should be mailed to me at the address shown in Paragraph One (1) above.

IN WITNESS WHEREOF, I have voluntarily signed my name, this _____ day of _____, 20____.

(Signature)

[Check one]: ☐ Mother ☐ Father ☐ Guardian

Printed Name: _____

Address: _____

Phone No.: _____

Sworn to and subscribed before me
this _____ day of _____, 20____.

Notary Public (Seal)

ATTACHMENTS

☐

Parenting Plan

☐

Child Support Order Addendum

☐

Case Disposition Form & 3907 Form

☐

Other

General Civil and Domestic Relations Case Disposition Information Form

☐ Superior or ☐ State Court of _____ County

For Clerk Use Only

Date Disposed _____
MM-DD-YYYY

Case Number _____

Case Style _____

Plaintiff(s)

Last	First	Middle I.	Suffix	Prefix
____	____	____	____	____
____	____	____	____	____
____	____	____	____	____
____	____	____	____	____

Defendant(s)

Last	First	Middle I.	Suffix	Prefix
____	____	____	____	____
____	____	____	____	____
____	____	____	____	____
____	____	____	____	____

Reporting Party _____

Plaintiff's Attorney _____

Bar Number _____

Self-Represented ☐

Defendant's Attorney _____

Bar Number _____

Self-Represented ☐

Manner of Disposition Check Only One

- ☐ Jury Trial
☐ Bench/Non-Jury Trial
☐ Non-Trial Disposition
☐ Alternative Dispute Resolution

- ☐ Check if any party was self-represented at any point during the life of the case.
- ☐ Check if the court ordered an interpreter for any party, witness, or other involved individual.
- ☐ Was the case referred/ordered to a court-annexed alternative dispute resolution (ADR) process?

eFile Registration & Quick Tips Guide

EMAIL: _____

MAILING ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE #: _____

TEMPORARY PASSWORD SETUP: Abcd1234

1. Account Registration & Setup Steps:

Register Your Account: Go to <https://efilega.tylertech.cloud> to create your profile.

Activate Account: Click the verification link sent to your email immediately to activate it.

Add Safe Sender: Add no-reply@efilingmail.tylertech.cloud to your email contacts to prevent notifications from going to spam. All case updates will come to your email.

Case Tracking & Portal: To view your case details anytime, log into <https://researchga.tylerhost.net> using your eFileGA email and password.

2. Preparing & Filing Your Case:

Document Preparation: Separate, scan, and save each of your documents to your computer as individual PDF files before uploading.

Submit Your Case: Visit efilega.tylertech.cloud to upload your documents and formally submit your case filing.

Need Assistance? For step-by-step Technical Help, visit the official support center at odysseyfileandservecloud.zendesk.com/hc/en-us.

Notice of Address Change: If your physical address or email address changes, you MUST file a formal 'Notice of Address Change' form directly with the Clerk's Office.

3. Important Notice for Poverty Affidavits:

• **If you are filing your case with a Poverty Affidavit:** You must wait until the Judge issues a decision on your Poverty Order *before* your case begins.

- **If Denied:** You must pay the full required filing fee to proceed with your case.

- **If Accepted:** Please follow the specific instructions below that apply to your exact case type.

4. Mandatory Next Steps After Your Case is Accepted (follow the steps that apply to the type of case you filed):

- ☐ **Cases Filed with an Agreement:** File your formal Request Letter 46 days after you receive the automated email notification that your case filings have been ACCEPTED.
- ☐ **Cases Filed with Sheriff Service:** File your Request Letter exactly 46 days after the Defendant has been served. You will receive an automated email notification notifying you of the date of service.
- ☐ **Adult Name Change Cases:** Download the electronic file-stamped 'Notice of Name Change' from your email. Provide this document to The Macon Reporter (478-994-2358) to run in the newspaper for 4 consecutive weeks. After 4 weeks have concluded, request the 'Publisher's Affidavit' from the Macon Reporter; E-File it into your case, and then file your Request Letter.
- ☐ **Minor Name Change Cases:** File your Request Letter only after you receive notification that your 'Publisher's Affidavit' has been accepted into your case.

To view your case details anytime, log into <https://researchga.tylerhost.net> using your eFileGA email and password.

Envelope #: _____	Case #: _____ (Assigned when case has been accepted)	Clerk Assisted: _____ Date: _____
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