PCS Code: PNP TCS Code: PNPR

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STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY

PETITION FOR NAME CHANGE AND EX PARTE REQUEST FOR NONPUBLICATION AND CONFIDENTIAL RECORD

CASE NO	D. and	JUDGE
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Court address Court telephone no.

You must complete form *PC 51* or *PC 51c* to begin a name change proceeding. Use form *PC 51*, *Petition for Name change*, unless you have good cause not to publish notice of your name change proceeding, such as you believe publication of the notice of hearing will put you or another individual in danger of physical harm, or at risk of unlawful retaliation or discrimination. If you have good cause, use this form, *PC 51c*, *Petition for Name Change and Ex Parte Request for Nonpublication and Confidential Record*.

In the matter of	
Petitioner's name, address, and telephone no.	Petitioner's attorney, bar no., address, and telephone no.
\Box 1. An action within the jurisdiction of the family division of c	ircuit court involving the family or family members of
person(s) named above has been previously filed in	Court,
Case Number, was assigned to J	udae
and \square remains \square is no longer pending.	,
2. Each person for whom a name change is sought has been	a resident of the county for at least one year.
\square 3. The name change is for	·
 □ a. a married person who wishes to also include a name whom the petitioner has legal custody. □ b. an adult only. □ c. a minor only. □ 4. The petition includes a request to change a minor's name 	
Parent Deceased Parent	Deceased.
	
mentally incompetent parent is Name	and/or the guardian of a (Attach letters of guardianship.)
 ☐ 5. As to a minor, one or more of the following is the petition ☐ the parents, jointly. ☐ the sole surviving parent. custody. ☐ the guardian of the minor. ☐ the gua 6. The name change is for the following reason: 	\square the only available parent if that parent has legal rdian of a parent declared mentally incompetent.
7. The name change is not sought for any fraudulent intent.	
8. The petitioner \square has \square does not have a criminal	al record, including pending charges. Specify any record:
(Add sheets if needed.)	
\square 9. \square a. The petitioner's spouse and/or minor child(ren) has \square b. The known criminal record(s) of the petitioner's spo	

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□ 9. The c □ a. □ b. □ c.	custodial parent of the/each minor cons The noncustodial parent has had the a regularly and substantially failed or neg this petition and either: a support order has been entered, a order for a period of two years or me a support order has not been entere supporting the minor(s), has failed of more before the filing of this petition The noncustodial parent has been con 750.520c, 750.520d, or 750.520e), or assault minor(s) or a sibling of the minor(s) wa	victed of child abuse (MCL 750.136b), crin with intent to commit criminal sexual cost s the victim. (Attach judgment of sentence.) victed of first degree murder (MCL 750.31	s). with the minor(s) and has rs or more before the filing of o substantially comply with the the ability to support or assist in stantial support for two years or ninal sexual conduct (MCL 750.520b, onduct (MCL 750.520g) and the	
	FROM (current name)	TO (proposed name)	DATE OF BIRTH	
	First:	First:		
Petitioner	Middle:	Middle:	Put DOB in Ref. No. row 10 on MC 97a.	
	Last:	Last:		
	First:	First:		
Spouse	Middle:	Middle:	Put DOB in Ref. No. row 11 on MC 97a.	
	Last:	Last:	1	
	First:	First:	Put DOB in Ref. No. row 12 on MC 97a.	
Minor child	Middle:	Middle:		
	Last:	Last:		
	First:	First:	Put DOB in Ref. No. row 13 on MC 97a.	
Minor child	Middle:	Middle:		
	Last:	Last:		
	First:	First:		
Minor child	Middle:	Middle:	Put DOB in Ref. No. row 14 on MC 97a.	
	Last:	Last:		
certificate(s). 11. I req of N 12. I reque this red	uest the court to order the State Registr lame(s) est an ex parte order directing nonpublic quest is set forth in the statement of go	cation and a confidential record. Evider	nat does not disclose the name(s) and to seal the original certificate.	
of my infor	mation, knowledge, and belief.			
Date		Petitioner's signature		

Petitioner's attorney signature

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STATEMENT OF GOOD CAUSE
I state the following as evidence of good cause for the court to order that no publication about this proceeding be published and that the record of the proceeding be confidential.
\Box 1. Publication of notice or the availability of the record of this proceeding could place
☐ me ☐
□ a. in physical danger or at greater likelihood of physical danger.□ b. at risk of unlawful discrimination or retaliation.
☐ 2. The basis of the fear or belief is that ☐ I ☐ Name
 □ a. am/is a victim of an assaultive crime, domestic violence, harassment, human trafficking, or stalking. □ b. seek(s) to affirm gender identity. □ c. other.
3. Please provide details concerning the responses above:
Note: The court must not require proof of an arrest or prosecution to reach a finding of good cause.
Date Signature

Name (type or print)

Petition for Name Change and Ex Parte Req Page 4 of 4	uest for Nonpublication and C	onfidential Record (5/25) Case No	
SIGNATURE OF PARENT/GUARD	DIAN FOR MINOR		
Date		Date	
Signature		Signature	
Name (type or print)		Name (type or print)	
Address		Address	
City, state, zip	Telephone no.	City, state, zip	Telephone no.
		for a spouse, this consent must be signed by t of this petition to change my name.	he spouse of the petitioner.
Date			
Signature		Attorney signature	
Name (type or print)		Attorney name (type or print)	Bar no.
Address		Address	
City, state, zip	Telephone no.	City, state, zip	Telephone no.
		itten consent to their name change. (Form PC sing of this petition to change my name	
Date			
Signature			
Name (type or print)			
CONSENT BY MINOR I am a minor and subject of the petit	tion. I consent to the grant	ing of this petition to change my name	э.
Date			
Signature			
Name (type or print)			