

WAYNE COUNTY PROBATE COURT

www.wayneprobateandjuvenile.org

ADULT NAME CHANGE CHECKLIST

Deposit: \$83.60

INITIATION REQUIREMENTS

- _____ Form 21.0 – Application for Change of Name Adult (RC 2717.02 and 2717.03)
 - _____ Applicant has been a resident of Wayne County, Ohio for at least 60 days immediately prior to filing of application.
 - _____ Ensure that first, middle and last name are spelled out and all appropriate boxes completed.
 - _____ Make sure all questions on application are answered.
- _____ Form 21.01 – Affidavit in Support of Application to Change Name
- _____ Form 21.14 – Release for Criminal Background Check
- _____ Certified copy of applicant’s current birth record (aka birth certificate). Cannot be more than 60 days old.
- _____ Copy of driver’s license or state I.D. (if one has been obtained)
- _____ Form 21.6 - Application to Waive Publication and Seal File (optional) – if filed, this request will add an additional \$7.53 to the deposit amount and will require a separate hearing to occur.
- _____ Pay Filing Fee