

**IN THE COURT OF COMMON PLEAS, LUCAS COUNTY, OHIO
JUVENILE DIVISION**

In the matter of:

Case Number: _____

Mother's Name

Address

City, State, Zip

Father's Name

Address

City, State, Zip

JOINT PRO SE MOTION FOR NAME CHANGE

Now come the Petitioners, _____, and
(Mother)

_____, who state that paternity was previously established with this court.
(Father)

They request this Court to change the name of the minor child(ren) herein from _____

_____ to _____.

Mother's Signature

Father's Signature

The upper portion of the attached "Court Ordered Paternity" form must be filled out completely and accompany this motion when being filed.

Determination of Paternity

The information on this form is used to create a New Birth Certificate

Section 3705.09 of the Ohio Revised Code states that when a man is presumed or found to be the father of a child according to section 3111.01 to 3111.19 of the Revised Code, or the father has acknowledged that child as his child in accordance with Section 2105.18 of the Revised Code, and documentary evidence of such fact is submitted to the Ohio Department of Health in such form that may be required, a new birth record shall be established.

Child's Personal Data

| | |
|--|---|
| Name of Child from Original Birth Record | Name of Child after Court Ordered Paternity |
| SS# | |

| | | |
|--|----------------------------------|-------------|
| Child's Place of Birth (City, County, State) | Child's Date of Birth (MM,DD,YY) | Child's Sex |
|--|----------------------------------|-------------|

| | |
|----------------------|-----------------------|
| Mother's Maiden Name | Mother's Present Name |
| SS# | |

INFORMATION PROVIDED ON THIS FORM IS TO BE USED TO ESTABLISH A NEW BIRTH CERTIFICATE FOR THE ABOVE-NAMED CHILD. NOTE: ALL INFORMATION CONCERNING THE FATHER IS TO BE GIVEN AS OF THE TIME OF THIS CHILD'S BIRTH.

| | |
|--------------------|--|
| Father's Full Name | Father's Place of Birth (State or Foreign Country) |
| SS# | |

| | |
|------------------------|--|
| Father's Date of Birth | Father's Race (American, Indian, Black, White, etc., Please Specify) |
|------------------------|--|

| | |
|--|--|
| Father's Origin or Descent (Italian, Mexican, German, English, etc., Please Specify) | Is Father of Hispanic Origin? Yes or No <small>(If Yes Specify – Mexican, Cuban, Puerto Rican, etc.)</small> |
|--|--|

| | | |
|---------------------------|---------------------------------------|--|
| Father's Usual Occupation | Father's Type of Business or Industry | Father's Education (Highest Grade Completed) |
|---------------------------|---------------------------------------|--|

Certification

State of Ohio Court of Common Pleas
 County of Lucas Juvenile Division

I hereby certify that _____ has been determined to be the father of the
(Father's Name)

above-named child on _____ in Case No. _____, and order the Ohio
(Date)

Department of Health to create a new birth record for this child.

Dated: _____

 Judge, Magistrate or Clerk