

**PROBATE COURT OF COSHOCTON COUNTY, OHIO  
VAN BLANCHARD II, JUDGE**

IN RE: CHANGE OF NAME OF: (Present Name) \_\_\_\_\_

TO: (Name Requested) \_\_\_\_\_

Case No. \_\_\_\_\_

**APPLICATION FOR CHANGE OF NAME OF MINOR  
[R.C.2717.01]**

The applicant states that the applicant is the parent legal guardian guardian ad litem of the minor and that the minor has been a bona fide resident of \_\_\_\_\_ County, Ohio for at least one year immediately prior to the filing of this application.

A certified copy of the minor's birth certificate is attached.

The applicant states that the name and address of the mother of the minor is:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

and the name of the father or alleged father of the minor is:

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Applicant states that the address of the mother father or alleged father is unknown and cannot with reasonable diligence be ascertained.

There is no person alleged to by the father of the minor.

The applicant states that the applicant:

1) \_\_\_\_\_  has  has not been convicted of, pleaded guilty to, or been adjudicated a delinquent child for  
(initials) identity fraud.

2) \_\_\_\_\_  has a  has no duty to comply with R.C. 2950.04 or R.C. 2950.041 because the applicant  
(initials) was convicted of, pled guilty to, or was adjudicated a delinquent child for having committed a sexually oriented offense of a child-victim oriented offense.

Case No. \_\_\_\_\_

The applicant requests a change of name of the minor from \_\_\_\_\_  
to \_\_\_\_\_  
for the following reason: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The applicant states that the applicant will cause notice of the application to be published once in a newspaper of general circulation in this county at least thirty (30) days before the hearing on this application. In addition, notice will be given by the applicant to any non-consenting parent or alleged father, whose addresses are known, by certified mail, return receipt requested.

\_\_\_\_\_  
Attorney for Applicant

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

\_\_\_\_\_  
City State Zip

( ) \_\_\_\_\_  
Telephone Number

( ) \_\_\_\_\_  
Telephone Number

Attorney Registration No. \_\_\_\_\_

### JUDGMENT ENTRY SETTING HEARING AND ORDERING NOTICE

The Court orders this application set for hearing on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
at \_\_\_\_\_ o'clock \_\_\_\_m. The applicant is ordered to cause notice of the application to be given  
by one publication in a newspaper of general circulation in this county at least thirty (30) days prior to the  
hearing date as required by law.

\_\_\_\_\_  
Probate Judge

By: \_\_\_\_\_  
Deputy Clerk

**PROBATE COURT OF COSHOCTON COUNTY, OHIO  
VAN BLANCHARD II, JUDGE**

IN RE: CHANGE OF NAME OF: (Present Name) \_\_\_\_\_

TO: (Name Requested) \_\_\_\_\_

Case No. \_\_\_\_\_

**CONSENT TO CHANGE OF NAME**

The undersigned \_\_\_\_\_

[check one of the following 3 capacities by which your consent is given]

- Mother
- Father
- Alleged Father

hereby waives notice of the hearing on the Application for Change of Name and consents to the change of name of \_\_\_\_\_  
to \_\_\_\_\_  
as proposed in the Application.

\_\_\_\_\_  
Signature

Sworn to before me and signed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

\_\_\_\_\_  
Deputy Clerk/Notary Public

**PROBATE COURT OF COSHOCTON COUNTY, OHIO  
VAN BLANCHARD II, JUDGE**

IN RE: CHANGE OF NAME OF: (Present Name) \_\_\_\_\_

TO: (Name Requested) \_\_\_\_\_

Case No. \_\_\_\_\_

**CONSENT TO CHANGE OF NAME**

The undersigned \_\_\_\_\_

[check one of the following 3 capacities by which your consent is given]

- Mother
- Father
- Alleged Father

hereby waives notice of the hearing on the Application for Change of Name and consents to the change of name of \_\_\_\_\_  
to \_\_\_\_\_  
as proposed in the Application.

\_\_\_\_\_  
Signature

Sworn to before me and signed in my presence this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_

\_\_\_\_\_  
Deputy Clerk/Notary Public

**PROBATE COURT OF COSHOCTON COUNTY, OHIO  
VAN BLANCHARD II, JUDGE**

- TRANSFER OF STRUCTURED SETTLEMENT OF
- TRANSFER OF MINOR SETTLEMENT OF
- GUARDIANSHIP OF
- TRUST OF
- ESTATE OF
- NAME CHANGE OF \_\_\_\_\_

CASE NO. \_\_\_\_\_

**CONSENT AND RELEASE**

I hereby give consent and permission to the Coshocton County Probate Court to obtain all information pertaining to me in the files of The Ohio Courts Network and/or Ohio Law Enforcement Gateway (OHLEG) for the purposes of the above captioned matter.

I hereby release The Ohio Courts Network, OHLEG and any and all of their employees, personnel, and other individuals providing information pursuant to this request from all liability in connection with the dissemination of such information to the Court.

Further, I executed an Applicant Information Form and I have been advised that this information will not be made public. However, information received from the Ohio Courts Network and/or OHLEG may be made part of the Court's case record and a public document after notice and an opportunity for a hearing has been given to me.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant's Printed Name

**PROBATE COURT OF COSHOCTON COUNTY, OHIO  
VAN BLANCHARD II, JUDGE**

- TRANSFER OF STRUCTURED SETTLEMENT OF
- TRANSFER OF MINOR SETTLEMENT OF
- GUARDIANSHIP OF
- TRUST OF
- ESTATE OF
- NAME CHANGE OF \_\_\_\_\_

CASE NO. \_\_\_\_\_

**APPLICANT INFORMATION**  
(PLEASE NEATLY PRINT OR TYPE)

NAME: \_\_\_\_\_  
                            First  Middle  Last

ADDRESS: \_\_\_\_\_  
                            Street

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_  
                            Home #  Work #  Cell #

SOCIAL SECURITY NUMBER: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_

DRIVER'S LICENSE NUMBER: \_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date

**THIS FORM IS NOT A PUBLIC RECORD AND WILL NOT BE MAINTAINED  
WITH THE CASE FILE IMAGED ON THE COURT'S WEBSITE.**

**PROBATE COURT OF COSHOCTON COUNTY, OHIO  
VAN BLANCHARD II, JUDGE**

IN RE: CHANGE OF NAME OF: (Present Name) \_\_\_\_\_

TO: (Name Requested) \_\_\_\_\_

Case No. \_\_\_\_\_

**NOTICE OF HEARING ON CHANGE OF NAME**

[R.C. 2717.01]

Applicant hereby gives notice to all interested to all interested persons and to \_\_\_\_\_, whose last known address is

(Necessary person whose address is unknown)

\_\_\_\_\_, that the applicant has filed an Application for Change of Name in the Probate Court of Coshocton County, Ohio, requesting the change of name of \_\_\_\_\_ to \_\_\_\_\_.

The hearing on the application will be held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ o'clock \_\_\_\_\_M. in the Probate Court of Coshocton County, located at 426 Main Street, Coshocton, Ohio 43812.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City State Zip

**Note to Publisher:** The above legal notice including the caption is to be published once in its entirety. Costs are to be paid by applicant and an Affidavit of Publication is to be furnished to applicant.

**PROBATE COURT OF COSHOCTON COUNTY, OHIO  
VAN BLANCHARD II, JUDGE**

CHANGE OF NAME OF: (Present Name) \_\_\_\_\_

TO: (Name Requested) \_\_\_\_\_

Case No. \_\_\_\_\_

**JUDGMENT ENTRY  
CHANGE OF NAME OF MINOR**

On \_\_\_\_\_ an application for change of name was heard by this Court. The Court finds that proper notice of the application and hearing date was given by one publication in a newspaper of general circulation in this court at least thirty days prior to the hearing on the application and proper notice was given to the legal parents, known father, or alleged father, as required by law. The Court further finds that reasonable and proper cause exists for changing the name and the name is in the best interest of the minor.

The Court finds the minor's complete name at birth was \_\_\_\_\_,

the minor's date of birth was \_\_\_\_\_, and the place of birth was

City: \_\_\_\_\_ County: \_\_\_\_\_ State: \_\_\_\_\_

Therefore, it is **ORDERED** the name of \_\_\_\_\_

be changed to \_\_\_\_\_.

\_\_\_\_\_  
Van Blanchard II, Probate Judge

**CERTIFICATION OF JUDGMENT ENTRY**

The above Judgment Entry – Change of Name of Adult is a true copy of the original kept by me as custodian of the records of this Court.

**VAN BLANCHARD II, PROBATE JUDGE**

By \_\_\_\_\_  
Deputy Clerk

Date \_\_\_\_\_