



Sample Petition to Change Name of Adult (CJP 27)

Massachusetts Trial Court
Probate and Family Court

Enter your current legal name here exactly as it appears on your legal documents.
This is the name you are asking to have changed.

Docket No.

Leave Blank. The Court will assign you a docket number.

		PETITION TO CHANGE NAME OF ADULT G. L. c. 210, § 12		Docket No.	Massachusetts Trial Court Probate and Family Court
In the Matter of: <u>Sandra</u> <u>Elizabeth</u> <u>Johnson</u> First Name Middle Name Last Name (current legal name of petitioner)				Nantucket Division You MUST reside in the county where this petition is filed.	
INFORMATION ABOUT THE PETITIONER					

Add the name of the **county** where you currently live. This is the Probate and Family Court where you will file your paperwork.

1.

1. My current legal name is: Sandra Elizabeth Johnson
First Name Middle Name Last Name
I was born in Nashville TN on 05/01/1976
City/Town State Date of Birth
2. I currently reside at: 111 Maple Avenue #2 Siasconset MA 02564
(Address) (Apt. Unit, No. etc.) (City/Town) (State) (Zip)
Mailing Address, if different: _____
(Address) (Apt. Unit, No. etc.) (City/Town) (State) (Zip)
Primary Phone #: 508-555-5555 Email Address: lizziejohnson@gmail.com

☐ Check here if the current address is a facility under the supervision of the Massachusetts Department of Correction.

FORM ALERT: The petitioner must reside in the county where this petition is filed.



Reside is where you currently live.

3. Have you ever legally changed your name prior to this petition? ☐ No ☒ Yes

If Yes, please complete the following:

From: Sandra Elizabeth Johnson
To: Sandra Johnson Jones
Reason: Marriage
From: Sandra Johnson Jones
To: Sandra Elizabeth Johnson
Reason: Divorce

FORM ALERT: A certified copy of your birth certificate and a certified copy of any prior name change (i.e., marriage certificate, divorce decree, court order changing name) must be filed with this petition.

- ☒ Check here if you would like all certified copies of documents filed with the court returned to you after review and processing.

4.

4. Have you ever used any other name or alias? ☐ No ☒ Yes

If yes, please list any and all names that you have not previously listed above:

Elizabeth Johnson

This document gives information not legal advice. Ask a lawyer for legal advice about your situation.



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INFORMATION ABOUT THE PROPOSED NEW NAME

5.

5. I am requesting that my name be changed from my current legal name to:

Elizabeth
First Name

Sandrine
Middle Name

Johnson
Last Name

6.

6. I am requesting that my name be changed for the following reason:

This is the name I am known by to friends and family.

7.

AUTHORIZATION TO CONDUCT A CARI AND WMS CHECK

7. I authorize the court to conduct a Court Activity Record Information (CARI) and Warrant Management System (WMS) check on any names used by me by submitting the attached Court Activity Record Information and Warrant Management System Release Request Form (CJP 34).

8.

OTHER REQUESTS (OPTIONAL)

8. ☐ If there is a hearing on this petition, I request an interpreter. Language: _____

9.

9. ☒ I would like to request that court staff use these pronouns while I am at court: she/her

NOTARIZED SIGNATURE OF PETITIONER

Date: 4/11/2024

Sign here in the presence of a Notary Public

Sandra E. Johnson

Sandra Elizabeth Johnson
Type or Print Name of Petitioner

**Notarized
Signature of the
Petitioner.**

On this 11 day of April, 20 24, in the state of Massachusetts, before me, the undersigned notary public, personally appeared Sandra Johnson, proved to me through satisfactory

(Name of Document Signer)

evidence of identification, which were License, to be the person who signed the preceding or attached document in my presence, and who swore or affirmed to me that the contents of the document are truthful and accurate to the best of (his) (her) knowledge and belief.

(seal) Notary Public Signature

John K. Smith

My commission expires: 02/01/2029

Print Name John K. Smith

State of Commission Massachusetts

Information on Attorney for Petitioner, if any

Signature of Attorney

(Print name)

(Address)

(Apt. Unit, No. etc.)

(City/Town)

(State)

(Zip)

Primary Phone #: _____

B.B.O. # _____

Email: _____

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Number 1. ***REQUIRED**

***Enter your current legal name here exactly as it appears on your legal documents. This is the name you are asking to have changed.**



Petitioner is the person who is seeking a name change. You are the **Petitioner** for the purpose of filing your name change.

***Enter your place and date of birth. This should match your birth record.**

NUMBER 2 ***REQUIRED**

***Current Address:** This is where you are living. You **MUST** file for your name change at the Probate and Family Court in the county where you reside. [Click here for a list of Probate and Family Courts.](#)



Reside is where you currently live.

If your current address is a facility under the supervision of the Department of Correction, check the box in number 2.

Mailing Address: If you would like to have the court send your mail to a different address, enter it here. You can also leave this blank.

***Primary Phone:** You must provide the best phone number where the court can contact you.

***Email address:** Include your email address if you have one.

NUMBER 3. ***REQUIRED**

***You MUST choose Yes or No.**

If you have changed your name before, you will enter the original name, new name, and reason for the prior name change.

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If you have changed your name more than once, click the “Add” button to add a new name change or provide an additional sheet of paper with the information. You must list every name change.

Common name changes include, but are not limited to:

- Divorce Judgments or decrees
- Marriage Certificates
- Decrees, Orders, or Judgments of name changes
- Naturalization certificates

*You will be required to provide a certified copy of your birth record (certificate) and certified copies of any prior name changes when you file your petition.

By checking the box below the form alert, the court will return your certified copies to you by mail.

NUMBER 4. *REQUIRED

*You **MUST** choose Yes or No. Enter any names you have used that are not already included in number 5.

NUMBER 5. *REQUIRED

*Enter the name you want to legally be called here. If allowed, this will be your new legal name.

NUMBER 6. *REQUIRED

*Enter the reason for your name change. Keep the information simple and concise.

NUMBER 7. *REQUIRED

*You will be required to file a form [Court Activity Record Information and Warrant Management System Release Request \(CJP 34\)](#) with your petition.

*The court will run a criminal background check on you.

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This information may be used to determine if you provided proper service of your name change petition and to verify that your name change does not go against public interest.

NUMBER 8.

Check this box if you need someone to help interpret for you at a court hearing. Enter the language you speak.

NUMBER 9.

Check this box if you would like court staff to use specific pronouns for you while you are at court.

NOTARIZED SIGNATURE OF THE PETITIONER ***REQUIRED**

***DO NOT SIGN THIS FORM UNLESS YOU ARE IN THE PRESENCE OF A NOTARY PUBLIC.**

You must sign using your current legal name (the name you are asking to be changed).

You will be required to sign this petition in the presence of a Notary Public. A Notary Public is an official who is commissioned by the state to witness documents.

Bring your unsigned completed petition to the Notary Public. You will sign the petition in front of the notary public using your current legal name (the name you are asking to be changed). You will be required to show identification to prove you are the petitioner. To find more information on notaries, go to <https://www.mass.gov/service-details/find-a-notary-public>

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