

## Instructions for Adult Name Change

These sample forms have been assembled for your convenience in preparing an adult legal name change. If you have questions regarding how to prepare these forms or if these forms are not suitable for your situation to obtain a name change, we suggest you CONTACT AN ATTORNEY or consult the NORTH CAROLINA GENERAL STATUTES, Chapter 101 for additional information. These forms are designed to cover a name change where good cause is shown for the name change and:

- o You are 18 years of age or older
- o You are not changing your name to avoid creditors, criminal charges or civil law suits
- o You have never changed your name before, pursuant to N.C.G.S. Chapter 101
  - o If your name has been changed before, you will have to provide an explanation of that change in your petition. N.C.G.S. 101-6 provides for only one name change; however, you will be permitted to resume your former name following divorce or the death of a spouse. See Resumption of Former Name form.

The following steps and procedures must be completed to file for a name change.

### **ALL FORMS MUST BE TYPED OR PRINTED IN BLACK INK**

**\*The Filing Fee is \$100**

- 1) **Before** filing a PETITION for name change with the Clerk's office, the applicant must give NOTICE of the application. The NOTICE must be posted on the courthouse bulletin board, outside the Clerk's Office at the EBCI Justice Center for at least ten (10) calendar days. If the 10<sup>th</sup> day falls on a Saturday, Sunday, or holiday on which the Clerk's office is closed, your NOTICE must remain posted until 4:30pm the following business day. Bring the NOTICE to the Clerk's office to have it file stamped before posting. To avoid having to post the NOTICE again, always keep a copy of your file stamped NOTICE in case the original is lost or removed from the bulletin board.
- 2) After your NOTICE has been posted as required by law, you may then file your PETITION FOR LEGAL NAME CHANGE and it must contain the following:
  - a. Applicant's true (birth) name
  - b. County of Birth
  - c. Date of Birth
  - d. Parents' full names as shown on the birth certificate
  - e. Name applicant seeks to adopt
  - f. Reason for name change
  - g. Details regarding any previous name changes (if applicable)
- 3) A SWORN STATEMENT must be notarized and filed showing the following:

The Clerk's Office staff is legally prohibited from: providing any legal advice, providing instructions for completing forms. Referring an attorney, or recommending specific ways to pursue legal action.

- a. Applicant is a bona fide resident of and domiciled on the Qualla Boundary; and
  - b. Whether or not the applicant owes taxes or has child support obligations
- 4) Two (2) AFFIDAVITS OF CHARACTER are required. The AFFIDAVITS must be:
- a. Signed in front of a Notary Public prior to filing with the Clerk's office;
  - b. Signed by individuals who are residents of the Qualla Boundary, not related by blood or marriage to the applicant, and who are at least 18 years of age.
- 5) An original or certified copy of the applicant's BIRTH CERTIFICATE is required.
- 6) Applicants must also file certified results of official Tribal, State, and National criminal history RECORD CHECKS.
- a. Tribal Criminal Record-contact the Criminal Clerk for Cherokee Courts
  - b. State Criminal Record-contact the North Carolina State Bureau of Investigation
  - c. Federal Criminal Record-contact the Federal Bureau of Investigation
- 7) The ORDER FOR ADULT NAME CHANGE must contain the following:
- a. Applicant's true (birth)name
  - b. County of Birth
  - c. Date of Birth
  - d. Parents' full names as shown on birth certificate
  - e. Desired name of applicant
  - f. Summary of forms presented for review by Clerk in connection with application
- 8) ORDER AND CERTIFICATE OF NAME CHANGE will be provided by the Clerk.

When dropping off your documents at the Clerk's Office, include a phone number and your mailing address where you can be reached. Your PETITION will be processed and you will be contacted if additional information is needed. Please provide a self-addressed, stamped envelope and we will return a signed copy of the ORDER to you.

Upon receipt of the signed ORDER, you may apply for a new birth certificate from the NC Register of Deeds (if applicable). Instructions and a sample application are included for your convenience, but it will be your responsibility to send in the necessary documentation and pay any associated fees.

The Clerk's Office staff is legally prohibited from: providing any legal advice, providing instructions for completing forms. Referring an attorney, or recommending specific ways to pursue legal action.

EASTERN BAND OF CHEROKEE INDIANS  
QUALLA BOUNDARY  
CHEROKEE, NORTH CAROLINA

IN THE CHEROKEE COURT  
BEFORE THE CLERK

File No. \_\_\_\_\_

IN RE: ADULT NAME CHANGE

FROM: \_\_\_\_\_ )  
(current name) )  
TO: \_\_\_\_\_ )  
(desired name) )

NOTICE

\_\_\_\_\_  
(Your current name), a resident of the Qualla Boundary in Cherokee, North Carolina, hereby gives notice of his/her intention to file in the Office of the Clerk of Court of Cherokee, North Carolina, ten (10) days after the date of this notice, a PETITION that the Court issue an ORDER changing his/her name from: \_\_\_\_\_ (current name) to \_\_\_\_\_ (desired name).

This is the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Petitioner's Name

\_\_\_\_\_  
Petitioner's Signature

\_\_\_\_\_  
Petitioner's Address

EASTERN BAND OF CHEROKEE INDIANS  
QUALLA BOUNDARY  
CHEROKEE, NORTH CAROLINA

IN THE CHEROKEE COURT  
BEFORE THE CLERK  
File No. \_\_\_\_\_

IN RE: ADULT NAME CHANGE )

FROM: \_\_\_\_\_ )

TO: \_\_\_\_\_ )

NOW COMES \_\_\_\_\_, a resident of the Qualla Boundary, Cherokee,

North Carolina, and respectfully petitions the Court for an Order to be issued changing his/her name and, to that end, does hereby state and show unto the Court;

PETITION FOR LEGAL NAME  
CHANGE OF AN ADULT

1. That the Petitioner's name as shown on the birth certificate is

\_\_\_\_\_ ; who was born in \_\_\_\_\_ County,

State of \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ (month),

\_\_\_\_\_ (year); that the full name of my mother as listed on my birth certificate is

\_\_\_\_\_ and that the full name of my father as listed on my birth certificate is \_\_\_\_\_.

2. That the Petitioner desires to adopt the name: \_\_\_\_\_.
3. That the Petitioner desires to change his/her name for the following reasons:

4. That the Petitioner's name has never been changed pursuant to N.C. Gen. Stat. §101.
5. That the Petitioner has given ten (10) days notice of the filing of this Petition by posting on the courthouse bulletin board, on the Qualla Boundary, Cherokee, North Carolina, a notice of his/her intent to file this petition.

**WHEREFORE**, the Petitioner respectfully prays that the Court enter an Order changing the

Petitioner's name from \_\_\_\_\_ to

\_\_\_\_\_.

This the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Petitioner's Signature

I, \_\_\_\_\_, Petitioner, being first duly sworn, hereby state that I have read the foregoing Petition and that the facts set forth therein are true to my own knowledge and belief.

This the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Petitioner's Signature

Subscribed and sworn before me

this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

EASTERN BAND OF CHEROKEE INDIANS  
QUALLA BOUNDARY  
CHEROKEE, NORTH CAROLINA

IN THE CHEROKEE COURT  
BEFORE THE CLERK  
File No. \_\_\_\_\_

**SWORN STATEMENT**

This sworn statement is being made for the purpose of petitioning the court to change my name from

\_\_\_\_\_ To \_\_\_\_\_.

I, \_\_\_\_\_ (full name) swear or affirm:

1. I am a bona fide resident of the Qualla Boundary in Cherokee, North Carolina residing at;

\_\_\_\_\_ (address)

for \_\_\_\_\_ years, and I have not been a resident of any other County or State within the

United States of America since \_\_\_\_\_ (month and year).

2. I \_\_\_\_\_ (full name) attest that I have no outstanding tax or  
child support obligations.

I \_\_\_\_\_ (full name) further certify that the above information is true

and accurate. Furthermore, I understand that if any of the information contained in this letter is false,

I can be held accountable and penalized in a court of law.

This is the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of Affiant

\_\_\_\_\_  
Printed Name of Affiant

\_\_\_\_\_  
Address of Affiant

**VERIFICATION**

Subscribed and sworn before me

this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

EASTERN BAND OF CHEROKEE INDIANS  
QUALLA BOUNDARY  
CHEROKEE, NORTH CAROLINA

IN THE CHEROKEE COURT  
BEFORE THE CLERK  
File No. \_\_\_\_\_

**IN RE: ADULT NAME CHANGE**

FROM: \_\_\_\_\_ )  
(current name) )  
TO: \_\_\_\_\_ )  
(desired name) )

**AFFIDAVIT OF CHARACTER**

The undersigned, being first duly sworn, deposes and says:

1. I am a resident of the Qualla Boundary in Cherokee, North Carolina.
2. I am not related to the Petitioner either by blood or marriage.
3. I have known the Petitioner for \_\_\_\_\_ (number of years).

I personally know him/her to be a person of good character and know that he/she has a reputation as a person of good character and good standing in the community.

This is the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of Affiant

\_\_\_\_\_  
Printed Name of Affiant

\_\_\_\_\_  
Address of Affiant



**VERIFICATION**

Subscribed and sworn before me

this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

EASTERN BAND OF CHEROKEE INDIANS  
QUALLA BOUNDARY  
CHEROKEE, NORTH CAROLINA

IN THE CHEROKEE COURT  
BEFORE THE CLERK  
File No. \_\_\_\_\_

**IN RE: ADULT NAME CHANGE**

FROM: \_\_\_\_\_ )  
(current name) )  
TO: \_\_\_\_\_ )  
(desired name) )

**AFFIDAVIT OF CHARACTER**

The undersigned, being first duly sworn, deposes and says:

1. I am a resident of the Qualla Boundary in Cherokee, North Carolina.
2. I am not related to the Petitioner either by blood or marriage.
3. I have known the Petitioner for \_\_\_\_\_ (number of years).

I personally know him/her to be a person of good character and know that he/she has a reputation as a person of good character and good standing in the community.

This is the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of Affiant

\_\_\_\_\_  
Printed Name of Affiant

\_\_\_\_\_  
Address of Affiant

**VERIFICATION**

Subscribed and sworn before me

this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

My Commission Expires: \_\_\_\_\_

\_\_\_\_\_  
Notary Public

EASTERN BAND OF CHEROKEE INDIANS  
QUALLA BOUNDARY  
CHEROKEE, NORTH CAROLINA

IN THE CHEROKEE COURT  
BEFORE THE CLERK  
File No. \_\_\_\_\_

IN RE: ADULT NAME CHANGE )  
FROM: \_\_\_\_\_ )  
TO: \_\_\_\_\_ )

**ORDER FOR LEGAL NAME  
CHANGE OF AN ADULT**

**THIS CAUSE**, coming on to be heard before the undersigned Clerk of Court of The Cherokee Court, Cherokee, North Carolina, upon application of: \_\_\_\_\_ (full name), to change his/her name from \_\_\_\_\_ (current name) to \_\_\_\_\_ (desired name).

**AND IT APPEARING TO THE COURT** that the applicant has given notice of this application as required by law; that good and sufficient reason exists for petitioner's requested change of name; that the true name of the petitioner is \_\_\_\_\_ (birth name); that he/she was born in \_\_\_\_\_ County, State of \_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_ (month), \_\_\_\_\_ (year); that his/her birth parent(s) as shown on the birth certificate is/are; \_\_\_\_\_ (mother's full name) and \_\_\_\_\_ (father's full name), that his/her name has not been previously changed and that she has submitted federal, state, and tribal criminal histories; that she owes no outstanding tax or child support obligations; and that the petitioner has shown good and sufficient reason for the change of name.

**THE COURT CONCLUDES**, upon review of the following documents;

1. Notice of Petitioner's intention to file a Petition of Legal Name Change of an Adult was filed on \_\_\_\_\_ (month), \_\_\_\_\_ (day), \_\_\_\_\_ (year);
2. Certified Petition for Legal Name Change of an Adult;
3. Sworn Statement;

4. Two (2) Affidavits of Character;
5. Certified copy of Certificate of Live Birth of \_\_\_\_\_ (full name);
6. U.S. Department of Justice Federal Bureau of Investigation Criminal History record, North Carolina State Bureau of Investigation Criminal History record, Cherokee Court Criminal History Record; and
7. Order for Adult Name Change

That the Petitioner is entitled to a change of name as requested herein;

**NOW THEREFORE, IT IS ORDERED, ADJUDGED AND DECREED** that the name of

\_\_\_\_\_ is changed to \_\_\_\_\_.

This the \_\_\_\_\_ day of \_\_\_\_\_.

\_\_\_\_\_  
**L. Shannon Swimmer**  
Clerk of Clerk

Mail: 1903 Mail Service Center  
 Raleigh, NC 27699-1903

Location: 225 North McDowell St.  
 Raleigh, NC 27603-1382

PLEASE PRINT

## Application for a Copy of a North Carolina Birth Certificate

### Certificate Information

Full Name on Certificate

(If adopted, provide new information)

First Name

Middle Name

Last Name

Date of Birth

Month

Day

Year

Sex  Male  Female

Place of Birth

City

County

Were parents married at time of birth?  Yes  No

Is this person deceased?  Yes  No

Full Maiden Name of Mother

(Adoptive mother, if applies)

First Name

Middle Name

Last Name (before any marriage)

Full Name of Father

(Adoptive father, if applies)

First Name

Middle Name

Last Name

*Check all boxes that apply, add the fees in and place the total amount in 4. See further instructions on Page 2.*

### Your Relationship to the Person Whose Certificate is Requested (Check one)

#### 1. Order Certificate

Processing times vary.

Check website for current information.

(Non-refundable fee)

Certificate Search and First Copy (\$24) \$ \_\_\_\_\_

# \_\_\_\_\_ additional copies x \$15 \$ \_\_\_\_\_

Certified (Legally suitable for any purpose)

Uncertified (Suitable for research purposes)

#### 2. Record Changes (Only if applies)

Appointment required for in-person services.

(\$15 non-refundable processing fee)

Adoption \$ \_\_\_\_\_

Amendment \$ \_\_\_\_\_

Name Change \$ \_\_\_\_\_

Legitimation Court Order \$ \_\_\_\_\_

Legitimation (mother married father after child's birth) \$ \_\_\_\_\_

Paternity (no fee) \$ 00.00

Other \$ \_\_\_\_\_

#### 3. Faster Service (Choose only one)

Optional for mail-in requests

(\$15 non-refundable expedite fee)

Walk-in Service (\$15) \$ \_\_\_\_\_

Expedited Processing (\$15) \$ \_\_\_\_\_

(Shipped by regular mail)

Expedited Processing and Expedited Shipping (\$35) \$ \_\_\_\_\_

(Call for expedited shipping fees outside the continental United States)

#### 4. Total Fees

(Add 1+2+3 above for total) \$ \_\_\_\_\_

Self

Spouse (Current)

Brother/Sister

Child

Parent/Step-Parent

Grandparent

Authorized agent, attorney or legal representative of the person listed (**Proof REQUIRED**)

Other (may not be entitled to a certified copy) Specify \_\_\_\_\_

How do you plan to use this record?

(Please Print)

Requestor: \_\_\_\_\_

Print Name of Person Requesting a Certificate

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

Street Address (P.O. Box cannot be used for expedited shipping)

P.O. Box (If mailing to a P.O. Box, street address must also be listed above)

City, State, Zip Code \_\_\_\_\_

(Area Code) Telephone Number (During business hours) \_\_\_\_\_

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

Payment: Please pay with a cashier's check or money order made payable to N.C. Vital Records. Personal checks are not accepted. Requests that are submitted with no payment, or incomplete payment or incomplete information will be returned. Credit card payment is available for walk-in customers.

#### ID OF THE PERSON REQUESTING A CERTIFICATE IS REQUIRED:

See Page 2 for a list of acceptable IDs. Requests that do not include proper identification will be returned.

I hereby certify that all the above information is true to the best of my knowledge. Note: It is a felony violation of N.C. Law (G.S. 130A-26A) to make a false statement on this application or to unlawfully obtain a copy or a certified copy of a birth certificate.

Signature of Person Requesting a Certificate \_\_\_\_\_

Date \_\_\_\_\_

Office Use Only: SFN \_\_\_\_\_ DCN \_\_\_\_\_ Cartridge/Frame \_\_\_\_\_

Amount received: \$ \_\_\_\_\_ Identification presented \_\_\_\_\_

Request number \_\_\_\_\_ Request date \_\_\_\_\_

CUSTOMER MUST COMPLETE

### Order Certificate

A certificate search costs \$24 and includes one copy if the certificate is located. The search covers a three year period. Requests are processed in the order received and can take up to five weeks plus the mail delivery time. The search fee is required to process a request and is non-refundable even if a record cannot be located.

### Record Changes

Complete this section only if you are making a request to change information on the birth certificate. The \$15 processing fee to review your request is non-refundable. In-person assistance for this service is by appointment only. Please call (919) 792-5986 to schedule an appointment. If your request involves more than one birth record, the \$15 processing fee applies to each individual's birth record that requires change(s).

### Faster Service

To receive expedited service you **MUST** write "Expedite" on the outside of the envelope. Expedited requests will be processed within 10 business days. This does not include the additional day(s) for shipping. This is a non-refundable fee.

## Identification Requirement

Due to identity theft and other fraudulent use of vital records, **ID of the person requesting a certificate is REQUIRED.** Requests that do not include ID will be returned. You **MUST** include a legible photocopy of one of the photo IDs listed below with your request:

- Current state-issued driver's license (address must match requestor's address on application)
- Current state-issued non-driver photo ID card (address must match requestor's address on application)
- Current Passport or Visa (must include photo)
- Current U.S. military ID
- Current Department of Corrections photo ID card dated within the last year
- Current state or U.S. government agency photo ID card (for persons requesting certificates as part of that agency's business)
- Current student ID card with copy of transcript

If you do not have one of the IDs listed above, you must provide legible photocopies of **TWO** of the following (must be two **DIFFERENT** forms of ID):

- Temporary driver's license
- Current utility bill with current address
- Car registration or title with current address
- Bank statement with current address
- Pay stub with current address
- Income tax return/W-2 form showing current address
- Letter from government agency dated within the last six months and showing current address
- State-issued concealed weapon permit showing current address

*If you are unable to meet our ID requirements, a family member or other person who is entitled to obtain the certificate, and who can meet the ID requirements, may request it.*

*A list of persons entitled to obtain certificates is located on our website at <http://vitalrecords.nc.gov/faqs.htm>.*