

PROBATE COURT OF BUTLER COUNTY, OHIO
JOHN M. HOLCOMB, JUDGE

IN THE MATTER OF: _____

CASE NO. _____

SELF-REPRESENTATION ACKNOWLEDGMENT

I acknowledge that I have read, understand and agree with all of the following statements:

1. The Court strongly recommends that I hire an attorney to represent me in this case. Contrary to the Court's recommendation, I have chosen to proceed with this case without the assistance of an attorney.
2. I have the time, knowledge, and ability to handle all aspects of this case correctly without assistance from the Court or any other person.
3. The Court and its Deputy Clerks are prohibited by law from assisting me with any aspect of this case, including without limitation determining what forms I am required to file and how to complete those forms.
4. The Court and its Deputy Clerks cannot provide me with any information regarding how to properly handle this case beyond the information available on the Court's website, www.butlercountyprobatecourt.org
5. I am responsible for understanding and correctly applying those portions of the Ohio Revised Code, Rules of Superintendence for the Courts of Ohio, Butler County Probate Court Local Rules of Practice, and all other rules, regulations, policies and procedures, and case law that relate to this case.
6. The Court will hold me to the same standards that apply to attorneys and personas represented by attorneys in similar probate proceedings.
7. If I do not fulfill my responsibilities in this case properly and in a timely manner I will be subject to the compliance policies in the Butler County Probate Court Local Rules.
8. I have a duty to act fairly, honestly, impartially and in the mutual best interest of all persons or entities that may have an interest in this case. I also have a duty to not do anything in my self-interest that is detrimental or harmful to others.
9. I may be personally liable to any person or entity that suffers financial damages as a result of anything I do in this case that does not comply with the legal requirements that apply to this case.
10. If I violate anything in this Self-Representation Acknowledgment, the Court may terminate my authority to proceed further with this case, or may require that I must be represented by an attorney to continue with this case.

Fiduciary/Applicant/Guardian

Typed Printed Name

Address

City/State/Zip

Telephone Number (include area code)

Email Address

IN RE: CHANGE OF NAME OF _____
 _____ (Present Name)
TO _____
 _____ (Requested Name)
CASE NO. _____

CASE NO. _____

Address_____
City, State, Zip Code

- ☐ The Waiver of Notice of Hearing and Consent of Parent 2 or the alleged father accompanies this Application.
- ☐ Applicant states that the address of Parent 2 or the alleged father is unknown. Applicant has exercised all due diligence and made every reasonable effort to find the current address but cannot locate this individual.
- ☐ There is no person alleged to be the father/Parent 2 of the minor.

An Affidavit in support of this Application is attached.

The Applicant will serve Notice of the Hearing on any nonconsenting parent or alleged father as the Court requires pursuant to R.C. 2717.14.

Attorney for Applicant_____
Applicant's Signature_____
Typed or Printed Name_____
Typed or Printed Name_____
Address_____
Address_____
City_____
State_____
Zip_____
City_____
State_____
Zip_____
Telephone Number (include area code)_____
Telephone Number (include area code)_____
Email Address_____
Email Address_____
Attorney Registration No.

PROBATE COURT OF BUTLER COUNTY, OHIO
JOHN M. HOLCOMB, JUDGE

IN THE MATTER OF: _____

CASE NO. _____

APPLICATION ADDENDUM

[TO BE COMPLETED WITH APPLICATION]

Please check the applicable box:

This is the original contact information for this case.

This is amended contact information for this case. Only the information that has changed is shown on this form. All other information remains the same as shown on the original contact information form.

Attorney for Applicant(s) _____

Street Address _____

City, State, and Zip Code _____

Telephone Number _____

Fax Number _____

Email Address _____

Attorney's Registration No. _____

Applicant's Name _____

Street Address _____

City, State, and Zip Code _____

Telephone Number _____

Email Address _____

Co-Applicant's Name _____

Street Address _____

City, State, and Zip Code _____

Telephone Number _____

Email Address _____

CASE NO. _____

APPLICATION ADDENDUM (Continued)

Additional Party's Name	_____
Street Address	_____
City, State, and Zip Code	_____
Telephone Number	_____
Email Address	_____

Additional Party's Name	_____
Street Address	_____
City, State, and Zip Code	_____
Telephone Number	_____
Email Address	_____

Additional Party's Name	_____
Street Address	_____
City, State, and Zip Code	_____
Telephone Number	_____
Email Address	_____

Additional Party's Name	_____
Street Address	_____
City, State, and Zip Code	_____
Telephone Number	_____
Email Address	_____

Additional Party's Name	_____
Street Address	_____
City, State, and Zip Code	_____
Telephone Number	_____
Email Address	_____

IN RE CHANGE OF NAME OF _____
(Present Name)

TO _____
(Requested Name)

CASE NO. _____

State of Ohio }
County of Butler } SS

Any other information relevant to the Application: _____

BCPC FORM 21.02 – AFFIDAVIT IN SUPPORT OF APPLICATION FOR CHANGE OF NAME OF MINOR Revised 2/2/2026

PROBATE COURT OF BUTLER COUNTY, OHIO
JOHN M. HOLCOMB, JUDGE

IN RE: CHANGE OF NAME OF _____
TO _____ (Present Name)
CASE NO. _____ (Requested Name)

**JUDGMENT ENTRY SETTING HEARING AND
ORDERING NOTICE**
[R.C. 2717.08 and 2717.14]

The Court sets the Application for Change of Name in this case for hearing on _____, 20____
at _____ M.

The Court orders the Applicant to serve a Notice of Hearing in the following manner on all necessary parties who have not waived notice:

- ☐ By certified mail, return receipt requested
- ☐ By personal service
- ☐ By publication once in a newspaper of general circulation in this county at least 30 days before the hearing
- ☐ Other: _____

Applicant shall file proof of service with the Court before the hearing.

Date

Probate Judge

IN RE: CHANGE OF NAME OF _____
(Present Name)
TO _____
(Requested Name)
CASE NO. _____

SCO-CLC-PBT 0021.4 (Rev. 12/2022) Previous Editions Obsolete

IN RE: CHANGE OF NAME OF _____
(Present Name)
TO _____
(Requested Name)
CASE NO. _____

SCO-CLC-PBT 0021.5 (Rev. 02/2023) Previous Editions Obsolete

PROBATE COURT OF BUTLER COUNTY, OHIO
JOHN M. HOLCOMB, JUDGE

IN RE: CHANGE OF NAME OF _____
(Present Name)
TO _____
(Requested Name)
CASE NO. _____

JUDGMENT ENTRY
CHANGING NAME OF MINOR
[R.C. 2717.09]

On _____, an Application for Change of Name of Minor was heard by this Court. The Court finds that all parties entitled to notice, e.g., legal parents, parent, father, or alleged father, either have waived notice of hearing and consented to the Application or were properly served and failed to object to the Application. The Court finds that Applicant has provided sufficient proof that the facts in the Application show reasonable and proper cause for changing the minor's name as requested.

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 _____
First Middle Last

be changed to _____
First Middle Last

Date

Probate Judge

CERTIFICATION OF JUDGMENT ENTRY

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

_____, Probate Judge

(Seal)

By: _____
Deputy Clerk

Date