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, at www.probatecourt@bcohio.gov.
6. 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.
7. The Court will hold me to the same standards that apply to attorneys and personas represented by attorneys in similar probate proceedings.
8. 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.
9. 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.
10. 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.
11. 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

PROBATE COURT OF BUTLER COUNTY, OHIO

JOHN M. HOLCOMB, JUDGE

IN RE: THE NAME OF_____
(Present Name)

TO _____
(Requested Conformed Legal Name)

CASE NO. _____

APPLICATION TO CONFORM LEGAL NAME OF MINOR

[R.C. 2717.04, 2717.05, and 2717.13]

Applicant states that a misspelling, inconsistency, or other error of the above-named minor's legal name exists on one or more of his or her official identity documents. This Application provides the necessary information to explain the misspelling, inconsistency, or other error and the corrections needed to conform the minor's legal name on all official identity documents.

The minor has been a bona fide resident of this county for at least 60 days immediately before filing this Application.

Minor's Information:

Present name: _____

Address: _____

Name at birth: _____

Date of birth: _____

State where birth record was issued: _____

Applicant's relationship to the minor is:

☐ Parent ☐ Legal Guardian ☐ Legal Custodian ☐ Guardian ad Litem

The name and address of Parent 1 of the minor is:

_____
Name

_____
Address

_____
City, State, Zip Code

☐ The Waiver of Notice of Hearing and Consent of Parent 1 accompanies this Application.

☐ Applicant states that the address of Parent 1 is unknown. Applicant has exercised all due diligence and made every reasonable effort to find the current address but cannot locate this individual.

The name and address of ☐ Parent 2 or ☐ the alleged father of the minor is:

CASE NO._____

_____
Name

_____
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 of the minor.

The following official identify documents(s) contain a misspelling, inconsistency, or other error: *[Check all that apply]*

☐ Social Security Card ☐ Driver's License

☐ Passport ☐ State-issued Identification Card

☐ Other _____

The misspelling, inconsistency, or other error on the official identity document(s) marked above is described below:

Official identity document:_____

Name that needs conformed on this document:_____

Conformed legal name that should be stated on this document: _____

Official identity document: _____

Name that needs conformed on this document: _____

Conformed legal name that should be stated on this document:_____

Requested conformed legal name: _____
First Middle Last

☐ Check this box if more than two official identity documents are affected and attach the information on a separate page.

The minor is one and the same person referenced in each of the official identity documents, despite the name discrepancy. But for the misspelling, inconsistency, or other error identified above, there would not be any discrepancy in the minor's chain of identity.

An Affidavit in support of this Application is attached.

All of the documentary evidence required by Local Rule or court order also accompanies this Application.

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.

Applicant requests the Court to issue an order conforming the minor's legal name in the manner described in this Application so the minor's legal name and chain of identity are consistent on all of his or her official identity documents.

_____ _____
Attorney for Applicant Applicant's Signature

CASE NO._____

_____	_____
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 APPLICATON]

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 _____

PROBATE COURT OF BUTLER COUNTY, OHIO

JOHN M. HOLCOMB, JUDGE

IN RE: THE NAME OF_____
(Present Name)

TO_____
(Requested Conformed Legal Name)

CASE NO. _____

AFFIDAVIT IN SUPPORT OF APPLICATION TO CONFORM LEGAL NAME OF MINOR

[R.C. 2717.06]

State of Ohio }
} *SS*
County of Butler }

The undersigned, in support of the Application to Conform Legal Name of Minor, deposes, says, and verifies the following.

Check all that apply:

1. ☐ Applicant has personal knowledge of the facts stated in this Affidavit;

2. ☐ The minor has been a bona fide legal resident of this county for a period of at least 60 days;

3. ☐ The Application is not being made for the purpose of evading any creditors or other obligations;

4. ☐ The minor is not a debtor in any currently pending bankruptcy proceeding;

5. ☐ All documentary evidence submitted with the Application is true, accurate, and complete.

The Applicant certifies under penalty of perjury that the statements in this Affidavit are accurate and complete.

_____ _____
Date Applicant

Sworn to before me and subscribed in my presence the _____ *day of* _____

_____
Notary Public/Deputy Clerk

_____
Typed or Printed Name

Commission Expiration Date_____

PRINT

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

IN THE MATTER OF THE

☐ **GUARDIANSHIP OF** _____

☐ **TRUST OF** _____

☐ **NAME CHANGE OF** _____

☐ **(Miscellaneous)** _____

CASE NO. _____

RECORD CHECK
AUTHORIZATION, WAIVER, AND CONSENT

I *consent* to the Probate Court of Butler County, Ohio (hereinafter referred to as "the Court") obtaining all criminal history information and background pertaining to me and appearing in the files of The Ohio Courts Network ("OCN"). This search is referred to as a "Records Check."

Through execution of this document, I *authorize* the release of criminal history and background information about me to the Court for a period of one year from the date this waiver is signed.

I understand that the information received as a result of this Records Check, will be filed in the confidential portion of the Court's case record for this matter and under Sup.R. 44 it is not deemed to be a part of the case documents or the case administrative documents pertaining to this file. It is therefore not a public record.

I *release* the data providers, including but not limited to OCN, as well as the Court, its personnel and its investigator, from liability otherwise arising as a result of collection and use of the Records Check results.

_____ _____
Date Signature of Applicant

_____
(Typed or legibly printed Name)

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

IN THE MATTER OF THE NAME OF _____
Present Legal Name

CASE NO. _____

WAIVER OF NOTICE OF HEARING AND CONSENT TO CONFORM LEGAL NAME OF MINOR
[R.C. 2717.14(D)]

The undersigned, being a parent or legal guardian of the minor, voluntarily waives notice of the hearing on the Application to Conform Name of Minor and consents to the Application in its entirety.

_____
Signature

_____
Printed Name

This Affidavit was sworn to before me, with oath or affirmation administered, and signed in my presence by _____ on _____ , _____ . This notarial certificate is a jurat under Ohio law.

_____
Notary Public

_____
Typed or Printed Name

Commission Expiration Date _____

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

IN THE MATTER OF THE NAME OF _____
Minor's Present Legal Name

CASE NO. _____

AFFIDAVIT FOR UNKNOWN ADDRESS OF A PARENT

STATE OF OHIO)
) **SS:**
COUNTY OF BUTLER)

The Applicant, being first duly sworn and cautioned, deposes and says that the address of _____ , the biological _____ of the above named minor is unknown and cannot with reasonable diligence be ascertained and that _____ is free from disability other than minority.

Affiant states that the last known address of _____ is _____ and that he/she has attempted to locate him/her by:

[Check all that apply]

☐ Mailed correspondence to the last known address that was returned by the post office as undeliverable

☐ Personally went to the last known address and verified that he/she no longer resides at said address

☐ Contacted relative(s)

☐ Contacted friend(s)

☐ Contacted current employer or last known employer

☐ Contacted Child Support Enforcement Agency

☐ Other: _____

_____
Affiant

This Affidavit was sworn to before me in my presence by _____ on _____ , _____ .

_____
Notary Public

_____
Typed or Printed Name

Commission Expiration Date _____

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

IN THE MATTER OF THE NAME OF _____
Present Legal Name

CASE NO. _____

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

The Court sets the Application to Conform Name in this case for hearing on _____

at _____

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 must file proof of service with the Court before the hearing.

_____ _____
Date John M. Holcomb, Probate Judge

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

IN RE: THE NAME OF_____
(Present Name)

TO_____
(Requested Conformed Legal Name)

CASE NO. _____

CONSENT TO NAME CONFORMITY
[R.C. 2717.14]

The undersigned _____

[check one of the following 2 capacities by which your consent is given]

☐ Parent
☐ Alleged Father

hereby waives notice of the hearing on the Application to Conform Legal Name and consents to the conformed legal name of: _____

to _____

as proposed in the Application.

Sworn to before me and signed in my presence this _____ day of _____,20_____.

Deputy Clerk/Notary Public

PRINT

PROBATE COURT OF BUTLER COUNTY, OHIO

JOHN M. HOLCOMB, JUDGE

IN RE: THE NAME OF_____
(Present Name)

TO _____
(Requested Conformed Legal Name)

CASE NO. _____

JUDGMENT ENTRY CONFORMING LEGAL NAME OF MINOR

[R.C. 2717.10]

This matter came before the Court for consideration of an Application to Conform Legal Name of Minor. Upon review of all the evidence presented, the Court finds there is sufficient proof that a misspelling, inconsistency, or other error of the minor's legal name exists on the official identity document indicated below, and that reasonable and proper cause exists for issuing this order to resolve the discrepancy and to conform the minor's legal name.

Official identity document(s) that requires conformity of misspelling, inconsistency, or other error:

- ☐ Social Security Card
- ☐ Driver's License
- ☐ Passport
- ☐ State-issued Identification Card
- ☐ Other _____

Name that needs conformed on document(s):_____

Conformed legal name that should be stated on the document(s): _____
First Middle Last

The Court finds that, despite the name discrepancy, this official identity document identifies one and the same person as the other official identity documents. Therefore, the Court orders that minor's name on this official identity document is conformed as stated above to be consistent with minor's other official identity document(s).

The Court further orders that minor's conformed legal name is: _____
First Middle Last

It is so ordered.

_____ _____
Date

_____, Probate Judge

CERTIFICATION OF JUDGMENT ENTRY

The above Judgment Entry Confirming Legal 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

PRINT