Reset Form

PROBATE COURT OF SUMMIT COUNTY, OHIO
ELINORE MARSH STORMER, JUDGE

IN RE: CHANGE OF NAME OF _____
(Present Name)

TO _____
(Name Requested)

CASE NO. _____

CONSENT TO CHANGE OF NAME

The undersigned _____ _____
(Typed or Printed Name) Date of Birth

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

- ☐ Parent
- ☐ 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 (**In the presence of Notary**)

_____
Typed or Printed Name

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

_____
Deputy Clerk/Notary Public