

## Name Change and/or Sex Designation Change Petition for Individual Adult (person 18 or over)

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nycourthelp.gov

_	Court	Index #:				
	county of					
_	etitioner (Your Present Name):					
a	m requesting a Court Order for the following (	check all that apply):				
	Name Change (complete Section A below)					
	Sex Designation Change (complete Section	B below)				
<u>SE</u>	ECTION A: NAME CHANGE (complete this section	on for a name change)				
1.	Your Requested New Name:					
2.	Your Place of Birth (Street Address, City/Town/Village, State, Zip, Country):					
	<ul> <li>*Proof of birth is required for this petition.</li> <li>If you were born outside of the State of New York, or any other legal document which shows the date</li> <li>If you were born in the State of New York, you must be Certified Copy of your Birth Certificate</li> <li>Certified Transcript of your Birth Certificate</li> <li>Certificate from Commissioner or local Board of</li> </ul>	and place of your birth.  ust attach one of the following:	port,			
3.	Have you ever been convicted of a crime?	Yes	No			
	If 'Yes' to question 3, you must answer question	s <b>4-5</b> .				
	4. Court where you were convicted:					
	5. Crime for which you were convicted:					
6.	Have you ever filed for bankruptcy?	Yes	No			
7.	Are there any judgments or liens of record ag	gainst you? Yes	No			
В.	Are you a party to any actions or proceedings	s? Yes	No			
	If 'Yes' to any of questions 6-8, provide details below. Check box if attachments are needed					
9.	Are you currently married?	Yes	No			
10	.Have you been previously married?	Yes	No			
11	.Do you have any children under 21?	Yes	No			

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12. Do you have to pay child support?			Yes	No
If 'Yes' to question 12, you must answ	er questions 13-15.			
13. Are child support payments satis	sfied and up to date?		Yes	No
If 'No,' how much do you owe? \$		_		
14. Court that issued the child support	ort order:			
15. Child Support Collections Unit: _				
l6.Are you responsible for spousal su <mark>լ</mark>	oport?		Yes No	
If 'Yes' to question 16, you must answ	er questions 17-18.			
17. Are spousal support payments s	atisfied and up to dat	:e?	Yes	No
If 'No,' how much do you owe? \$		_		
18. Court that issued the spousal su	pport order:			
19.Have you previously filed a name ch	nange petition in any o	court?	Yes	No
If 'Yes,' provide details below. Check	box if attachments are	needed		
SECTION B: SEX DESIGNATION CHAN	<b>GE</b> (complete this sect	tion for a sex designa	tion chanç	
 21.Your Requested New Sex Designation	on (select one):			,
22.Do you want to change your sex de	signation on an identi	ity document?	Yes	No
If 'Yes,' list the identity documents belocheck box if attachments are needed	ow. For example, your	birth certificate, drive	er's license	∍, etc.
23. Have you previously filed a sex design of 'Yes,' provide details below. Check	• • •	_	Yes	No
• •	• • •	_	res	

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24. Do you want to provide your reason Please note, this information is option designation. If 'Yes,' you may provid Check box if attachments are needed	nal and is not required e details below. If ' <b>N</b> o	for a court order to cha	
<u>SECTION C</u> : Personal Information (all	applicants must comp	plete this section)	
25. Your Present Name:			
26. Your Age:	,		
27. Your Date of Birth (Month/Day/Year	,		
28. Your Current Address (Street Addre	ess, City/Town/Village	, State, Zip, Country):	
29. When did you move to your curren	t address (Month/Da	v/Year):	
30. Should this court record be sealed If 'Yes,' provide details below. Check	•	•	Yes No
31.I respectfully request a Court Orde designation change, as applicable.  Petitioner Signature		ame change and/or  Date	sex
VERIFICATION			
State of New York, County of	SS.:		
I,		, the petitioner, being	duly sworn,
have read the above petition and say that best of my knowledge and belief.	at the information in th	e petition is true and acc	curate to the
	Petition	er Signature in Presen	ce of Notary
Sworn to before me this day of, 20			
Notary Public			