

STEP 3:

COURTHOUSE SECTION



STATE OF SOUTH CAROLINA
THE FAMILY COURT
JUDICIAL CIRCUIT
COUNTY OF _____
C.A. NO.: _____
In re: NAME CHANGE
AFFIDAVIT
Plaintiff

The undersigned, being duly sworn, states the following:

I, _____, am not obligated for any outstanding child support or
alimony payments ordered through the court in the name of _____ or
_____. My date of birth is _____ and my Social Security number is
_____-_____-_____.

Affiant

SWORN TO AND SUBSCRIBED

BEFORE ME THIS _____ DAY OF _____ 2017

Witness

Notary Public for South Carolina

My commission expires: _____

SAVE THIS PART UNTIL
YOU'RE WITH A NOTARY

STATE OF SOUTH CAROLINA
COUNTY OF
THE FAMILY COURT FOR THE
JUDICIAL CIRCUIT

In Re: NAME CHANGE
Plaintiff

PETITION FOR NAME CHANGE

Case No.:

The Petitioner would respectfully show unto the Court:

1. Petitioner is a resident of Greenville County, South Carolina.
2. Petitioner is ____ years of age.
3. Petitioner was born in _____ on _____.
4. The name on Petitioner's birth certificate is _____; a copy of Petitioner's birth certificate is attached hereto.
5. Petitioner would like to have a name change that more accurately expresses his/her gender identity, being that he/she is Transgender.
6. Petitioner wishes to change his/her name to _____.
7. Petitioner has attached hereto the results of a criminal background check and a screening statement from SLED indicating that he/she is not listed on the division's sex offender registry.
8. Petitioner has attached hereto a screening statement from SCDSS indicating that he/she is not listed on the department's Central Registry of Child Abuse and Neglect.
9. Petitioner has attached hereto an affidavit stating that he/she is not under any court order to pay child support or alimony.
10. Petitioner does not seek to change his/her name for any fraudulent, illegal or improper purpose.

WHEREFORE, the Petitioner prays:

A. For an order from this Court legally changing Petitioner's name to _____.

B. For an order from this Court entitling Petitioner to the issuance of an amended birth certificate reflecting the name of _____.

C. For such other and further relief as this Court deems just and equitable.

Respectfully Submitted,

← SIGN HERE -- NO NOTARY REQUIRED

_____, 2017
Greenville, South Carolina

STATE OF SOUTH CAROLINA)
)
 COUNTY OF _____)
)
 _____)
 Plaintiff,)
)
 vs.)
)
 _____)
 Defendant.)

IN THE FAMILY COURT
 _____ JUDICIAL CIRCUIT

FAMILY COURT COVERSHEET

Docket No. _____

NOTE: The coversheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for docketing purposes for the Clerk of Court and must be signed and dated, and filled out completely. A copy of this coversheet must be served on the defendant(s) along with the Summons and Complaint.

Submitted by: _____
Address: _____

Email: _____

SC Bar # _____
Telephone # _____
Fax # _____
Other: _____

**IF NO
 LAWYER,
 LEAVE
 BLANK**

DOCKETING INFORMATION (Check one box below if filing in a Mandatory Mediation County)

- ☐ This case is subject to MEDIATION pursuant to the Family Court Alternative Dispute Resolution Rules.
☐ This case is exempt from ADR (certificate attached).

Nature of Action Codes (Check One)	
Marital Dissolution	Support
<input type="checkbox"/> Divorce (110)	<input type="checkbox"/> Child Support – Private (501)
<input type="checkbox"/> Annulment (120)	<input type="checkbox"/> Child Support – Administrative Process (502)
<input type="checkbox"/> Separate Support and Maintenance (130)	<input type="checkbox"/> Child Support – Judicial Process (503)
<input type="checkbox"/> Registration of Foreign Divorce Decree – without support/custody (190)	<input type="checkbox"/> Registration of Foreign Order of Support (504)
<input type="checkbox"/> Registration of Foreign Divorce Decree – with support/custody (191)	<input type="checkbox"/> UIFSA – Outgoing (505)
<input type="checkbox"/> Marital Dissolution – Other (199) _____	<input type="checkbox"/> UIFSA – Incoming (506)
	<input type="checkbox"/> Modification of Child Support – Private (507)
	<input type="checkbox"/> Modification of Child Support – DSS (508)
Abuse and Neglect	<input type="checkbox"/> Modification of Alimony (525)
<input type="checkbox"/> Abuse and Neglect – Child (210)	<input type="checkbox"/> College Expenses (530)
<input type="checkbox"/> Abuse and Neglect – Adult (220)	<input type="checkbox"/> Support – Other (599) _____
<input type="checkbox"/> Abuse and Neglect – Other (299) _____	
	Custody/Visitation
	<input type="checkbox"/> Child Custody/Visitation (610)
Juvenile Delinquency	<input type="checkbox"/> Modification of Custody/Visitation (615)
<input type="checkbox"/> Truancy (311)	<input type="checkbox"/> Registration of Foreign Child Custody Order (690)
<input type="checkbox"/> Incurable (312)	<input type="checkbox"/> Custody/Visitation – Other (699) _____
<input type="checkbox"/> Runaway (313)	
<input type="checkbox"/> Criminal Offense (320)	Miscellaneous Actions
<input type="checkbox"/> Juvenile Delinquency – Other (399) _____	<input type="checkbox"/> Name Change (710)
	<input type="checkbox"/> Correction/Birth Record (720)
	<input type="checkbox"/> Judicial Bypass (730)
	<input type="checkbox"/> Adoption (740)
Protection from Domestic Abuse	<input type="checkbox"/> Foreign Adoption (741)
<input type="checkbox"/> Domestic Abuse – Intimate Partner (410)	<input type="checkbox"/> Post Dissolution Equitable Distribution (750)
<input type="checkbox"/> Domestic Abuse – Minor (420)	<input type="checkbox"/> Paternity – Private (761)
<input type="checkbox"/> Registration of Foreign Order of Protection (490)	<input type="checkbox"/> Paternity – DSS (762)
<input type="checkbox"/> Domestic Abuse – Other (499) _____	<input type="checkbox"/> Termination of Parental Rights – Private (771)
	<input type="checkbox"/> Termination of Parental Rights – DSS (772)
	<input type="checkbox"/> Miscellaneous Actions – Others (799) _____

Submitting Party Signature: _____ **Date:** _____

Custodial Parent (if applicable): _____

IF YOU'RE A MINOR, PARENT/GUARDIAN SIGNS HERE

Note: Frivolous civil proceedings are subject to sanctions pursuant to Rule 11, SCRPC and the South Carolina Frivolous Civil Proceedings Sanctions Act, S.C. Code Ann. § 15-36-10 et seq.

STATE OF SOUTH CAROLINA)
)
COUNTY OF _____)
)
)
)

IN THE FAMILY COURT
____ JUDICIAL CIRCUIT

REQUEST FOR HEARING

Plaintiff,)
vs.)

Defendant.)

Docket No. _____

Plaintiff's Attorney: _____

Mailing Address: _____

Telephone: (____) ____ - ____ ext. ____ Fax: _____

Email: _____

Defendant's Attorney: _____

Mailing Address: _____

Telephone: _____ ext. ____ Fax: _____

Email: _____

Guardian ad Litem: _____

Mailing Address: _____

Telephone: _____ ext. ____ Fax: _____

Email: _____

Type of Hearing: NAME CHANGE

Time Needed: 15 MINUTES

Dates and Times Unavailable: _____

Child Custody at Issue: ☐ Yes ☐ No

Are Other Issues Contested ☐ Yes ☐ No If yes, explain: _____

LEAVE BLANK UNLESS THERE'S A TIME/DAY YOU ABSOLUTELY CANNOT GO

If yes to either above, submit a mediation report.

Comments and Issues: _____

Hearing Requested by: _____ Date: _____, 20__

For: ☐ Plaintiff ☐ Defendant

******Section below to be completed by Clerk of Court. ******

The hearing in this matter is scheduled for ____ day of _____, 20__, at ____:____
a.m./p.m., Courtroom _____, before the Honorable
_____ for _____ (length of time).