

IN THE CIRCUIT COURT OF THE STATE OF OREGON
FOR THE COUNTY OF _____

In the Matter of:

Case No: _____

PETITION FOR CHANGE OF
 NAME **SEX**

Petitioner (*current name*)

Adult

I am the Petitioner. I am at least 18 years old or I have been emancipated by court order. I ask the court for a judgment (*check all that apply*):

changing my name (*use complete names. First, Middle, Last*)

from: _____

to: _____ // _____ // _____
First *Middle* *Last*

changing my legal sex

to: male female nonbinary

I have undergone surgical, hormonal, or other treatment appropriate to me for the purpose of affirming my gender identity

Public Interest (*check all that apply in Oregon or any other state*)

For any boxes you mark, explain, including the state and case numbers if available

I owe child support arrears or am currently ordered to pay child support _____

I have a protective order, stalking order, or restraining order in effect against me _____

I am currently on probation, parole, or under post-prison supervision _____

I am required to register as a sex offender _____

I have formerly used the following names (*include all names you have used, whether legally or used by custom*)

I ask that this record be SEALED by the court because: (*check all that apply*)

I am a participant in the Address Confidentiality Program under ORS 192.826

I am requesting a change of sex and I want the record to be sealed

I hereby declare that the above statements are true to the best of my knowledge and belief. I understand they are made for use as evidence in court and I am subject to penalty for perjury.

Date

Signature

Email

Name (printed) (*current name*)

Contact Address

City, State, ZIP

Contact Phone