

**INSTRUCTIONS AND FORMS FOR VERIFIED PETITION FOR
NAME CHANGE OF A MINOR CHILD (UNCONTESTED)**

This form references specific South Dakota Codified Laws (SDCL), and you can find these laws on the South Dakota Legislature website. If you have any legal questions, it is highly recommended that you consult with an attorney. Court staff are unable to provide you with legal advice or assist you in completing this form. For specific questions related to the forms, you can contact the Legal Form Helpline at 1-855-784-0004 or email UJS staff at ujssrlhelp@uj.s.state.sd.us.

To Complete this form, you will need to:

1. Complete the caption of the Petition.
 - a) Enter the County name that you are filing in.
 - b) Insert the Judicial Circuit of the County. You may find your Judicial Circuit number at the [Unified Judicial Website](#).
 - c) Enter the name of the minor child as it appears on their birth certificate on the first line provided.
 - d) Enter the proposed name you are requesting the child be changed to.
 - e) The Case Number will be provided to you by the Clerk of Court at the time of filing.
2. Complete the remainder of the form by filing in the information on the lines provided throughout.
3. Date and sign.

COUNTY OF _____

_____ JUDICIAL CIRCUIT

IN THE MATTER OF THE PETITION RE: _____ (Birth Certificate Name), A Minor Child For A Change of Name to: _____ (Proposed Name)	Case No.: _____ VERIFIED PETITION FOR NAME CHANGE OF A MINOR CHILD (UNCONTESTED)
--	---

COMES NOW Petitioner and does hereby state, under oath, as follows:

1. My current full name is: _____.
2. The minor child's name, as it appears on their birth certificate, is:

3. The minor child's date of birth is _____.
(mm/dd/yyyy)
4. The child's gender at birth (check one): ☐ male ☐ female
5. The minor child was born in the City of _____, in the County
of _____, and State of _____.
6. My relationship to the minor child named above is _____.
7. I currently reside at _____ which is
(Street Address)
located in _____, _____ County within the
(City) (County)
State of South Dakota.
8. I have been a resident of _____ County since _____
(County) (mm/yyyy)
9. The minor child named above currently resides at _____
(Street Address)
which is located in _____, _____ County
(City) (County)
within the State of South Dakota and has resided there since _____
(mm/yyyy)

10. The following are the full name(s) and last known mailing address(es) of the minor child's mother, father, or guardian:

(leave blank if already answered, unknown, or not applicable)

Mother's Name	Father's Name	Guardian Name
Mother's Address	Father's Address	Guardian Address

11. (a) During the past five years the child has lived with the following individuals, during the dates indicated and in the designated areas:

Caretaker's Name	Dates	County/State

(b) There ☐ has/ ☐ has not **(check one)** been prior court proceedings regarding the custody of the child. If so, that action took place in _____ County, in the State of _____, and in the year _____.

(If there has, please attach a copy of the most current order to this petition.)

There ☐ is/ ☐ is not **(check one)** a current pending court proceeding regarding the custody or visitation of the child. If so, that action is in _____
(County)
County, in the State of _____ and was commenced on

(mm/dd/yyyy).

(c) Other than the parents of the minor child, no one has ever had legal custody of this child except _____. *(if none, enter N/A).*

12. The full maiden name of the child's mother, as it appears on the child's birth certificate, is _____.

13. The full name of the child's father, as it appears on the child's birth certificate, is
(if the father's name is not listed on the birth certificate, enter N/A)

_____.

14. The mother's date of birth _____ and she was born in
(mm/dd/yyyy)
_____, _____ County, in the State of _____.
(City) (County) (State)

15. The father's date of birth _____ and he was born in
(mm/dd/yyyy)
_____, _____ County, and in the State of _____.
(City) (County) (State)

16. I am requesting that the child's name be changed from _____
to _____ because:

(if applicable, please check the box):

☐ thereby making the child a victim of human trafficking with a particularized need for a change of name to protect them from a person who victimized them, pursuant to SDCL 21-37-5.2.

17. This Petition is made in good faith. I do not intend to defraud anyone, and it is not done for the purpose of hiding my child's identity from any person, creditor or governmental agency of any kind or as to avoid discovery by such person, creditor or governmental agency.

18. ☐ (check the box and answer if applicable) If the minor child's legal name change is granted, I also seek amendment of the child's birth certificate for the following reason(s): _____

WHEREFORE, I pray that the court set this matter for hearing if required, and that the court enter an order changing the name of the minor child from _____ to _____.

I declare under penalty of perjury under the law of South Dakota that the foregoing is true and correct. Signed on the _____ day of _____,

(Year) at _____ (City or other location, and State) (Date) (Month)

Petitioner's Signature

Petitioner's Printed Name

Petitioner's Mailing Address

City, State, & ZIP Code

Petitioner's Phone Number