				NC-	ZU
	FORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number	er, and address): ST	ATE BAR NO:		
NA					
	M NAME: REET ADDRESS:				
CIT		STATE:	ZIP CODE:		
	LEPHONE NO.:	FAX NO. :	Zii OODL.		
	MAIL ADDRESS:	170010.			
	FORNEY FOR (Name):				
-					
1	JPERIOR COURT OF CALIFORNIA, COUNTY OF TREET ADDRESS:				
	AILING ADDRESS:				
	TY AND ZIP CODE:				
	BRANCH NAME:				
P	ETITION OF (Name):				
				CASE NUMBER:	
	PETITION FOR CHANGE OF	NAME AND	GENDER		
	Before you complete this petition, you should re page. You must answer all questions and check court of the county where the person whose name	all boxes that	apply to you on this	tition for Change of Name and Gender on the next spetition. You must file this petition in the superior	
1.	Petitioner (present name):			is a resident of this coul	nty
2.	Petitioner requests that the court decree that p	oetitioner's na	me is changed to (p	(proposed name):	
3.	Petitioner requests a decree that the petitioner	r's gender is o	changed:		
	a from male to female.				
	b. from female to male.				
4.				rough clinically appropriate treatment as provided a petition. (Declaration of Physician (form NC-210)	
5.	 Petitioner requests that the court order that a new birth certificate be issued reflecting the gender and name changes sought by this petition. 				
6.	Petitioner requests that the court issue an order change of name should not be granted.	er directing al	l interested persons	s to appear and show cause why the petition for	
7.	Petitioner provides the following information in	support of th	is petition:		
	a. The information contained in the physician	's affidavit or	declaration.		
	b–f. The information contained in the attachm the Person Whose Name Is to Be Chang			the attachment Name and Information About	

INSTRUCTIONS FOR FILING A PETITION FOR CHANGE OF NAME AND GENDER

1. Where to File

The petition for change of name and gender must be filed in the superior court in the county where the petitioner presently lives.

2. Whose Name May Be Changed

The petition may be used to change one's name and gender.

3. What Forms Are Required

You need an original and two copies of each of the following documents:

- a. Petition for Change of Name and Gender (form NC-200)
- b. Name and Information About the Person Whose Name Is to Be Changed (Attachment to Petition) (form NC-110)
- c. Declaration of Physician (form NC-210) (signed by the physician and attached to form NC-200)
- d. Order to Show Cause for Change of Name (form NC-220)
- e. Decree Changing Name and Gender (form NC-230)

4. Filing and Filing Fee

Prepare an original *Civil Case Cover Sheet* (form CM-010). File the original petition and *Civil Case Cover Sheet* with the clerk of the court and obtain two filed-endorsed copies of the petition. A filing fee will be charged unless you qualify for a fee waiver. (If you want to apply for a fee waiver, see *Request to Waive Court Fees* (form FW-001) and *Information Sheet on Waiver of Court Fees and Costs* (form FW-001–INFO).)

5. Requesting a Court Hearing Date

You should request a date for the hearing on the Order to Show Cause at least six weeks in the future.

6. Filing the Order to Show Cause

After the hearing date has been included and you have obtained a judge's signature on the *Order to Show Cause*, file the original order in the clerk's office and obtain filed-endorsed copies of the order.

7. Domestic Violence Confidentiality Program

In cases where the petitioner is a participant in the state address confidentiality program (Safe at Home), the petition, the order to show cause, and the decree should, instead of giving the proposed name, indicate that the name is confidential and on file with the Secretary of State. See *Information Sheet for Name Change Proceedings Under Address Confidentiality Program* (Safe at Home) (form NC-400-INFO).

8. Court Hearing

Bring copies of all documents to the hearing. If the judge grants the name and gender change petition, the judge will sign the original decree.

9. Birth Certificate

To obtain a new birth certificate reflecting the change of gender, file a certified copy of the order within 30 days with the Secretary of State and the State Registrar and pay the applicable fees. You may write or contact the State Registrar at:

California Department of Public Health Vital Records – MS 5103 P.O. Box 997410 Sacramento, CA 95899-7410

> Phone: 916-445-2684 Website: www.cdph.ca.gov

Local courts may supplement these instructions. Check with the court to determine whether supplemental information is available. For instance, the court may provide you with additional written information identifying the department that handles name and gender change petitions, and the times when petitions are heard.