

## **PUEBLO OF LAGUNA COURT**

P.O. Box 194 Laguna, New Mexico 87026 Tel. (505) 552-1900 Email: clerks@pol-nsn.gov

## PETITION FOR CHANGE OF NAME OF AN ADULT

IT IS IMPORTANT THAT PETITION IS FILLED OUT ACCURATELY OR TO THE BEST OF YOUR KNOWLEDGE. UNAVAILABLE INFORMATION WILL ONLY DELAY THE COURT PROCESS.

<u>PETITIONER:</u>			
Name:	DOB:	Social No:	
Tribal Affiliation:	Enrolln	nent No:	
Mailing Address:			
Physical Address:			
Email Address:	Phone	No:	

## PLEASE DOUBLE CHECK YOUR DOCUMENTS:

- Attach a copy of your Birth Certificate
- Driver License
- Other supporting documents
- Filing Fee of \$6.00 in a Money Order or Cashier's Check Please!
- If you should have any questions or need assistance with the Petition, please refer to our Approved Attorney list for help. Thank you.

STATE OF NEW MEXICO PUEBLO OF LAGUNA IN THE TRIBAL COURT

Petitione	<del>r,</del>	
<u>PE</u> T	TITION FOR CHANGE OF NAM	<u>E</u>
(Petitioner must be	e subject to the jurisdiction of the Pu	eblo of Laguna)
COMES NOW,(Petit	and hereby sta	ites the following in support of th
L. I am a resident of(village)	, County of Cibola, Sta	ate of New Mexico.
2. I am a Laguna Tribal member? Enrollment No:	[] Yes [] No. Tribal Affiliation:	
•	name change from (please print full not proposed new name).	name as stated on birth
	Proposed full name:	Date of Birth:
Petitioner seeks a name change	for the following reasons(s):	

CASE NO.

- 4. Petitioner understands that the Petition for Change of Name must be published in a newspaper of general circulation in Bernalillo or Cibola County, *twice in a months' time*.
- 5. Petitioner must submit proof of publication to the Pueblo of Laguna Court once published.

**WHEREFORE**, the Petitioner respectfully requests the Court issue an Order granting a Change of Name.

	Respectfully Submitted,
	Signature
	Print Name
Address:	
Phone #:	

CASE NO.	
----------	--

## **LEGAL NOTICE FOR CHANGE OF NAME**

	Т	o be changed to
Petitioner's New Nar	ne:	
(Thi	s document will go to a	general Newspaper Office for publishing).
		Signature of Petitioner
		Print Name
	Address:	4
	Phone #:	
		owledged, subscribed and sworn to before me thi
EAL)		Notary Public: