

# Application for Change of Name of an Adult 16 Years of Age or Older

# IMPORTANT: The Application for Change of Name is not required if name change is due to marriage. You can assume your partner's surname by submitting your Marriage Certificate to places where you are changing your name.

	Applicant Informat	ion					
1	Intent of Change	Surname Only	Given Names Only	Both Surname and Given Name	foundland and Labrador (and	within Canada in most	
		NOTE: A change of name will be reflected on the Registration of Birth if the event occurred in Newfoundland and Labrador (and within Canada in most cases). However, a change of name will only be reflected on the Registration of Marriage if requested.					
	Current Name (as shown on birth registration)	(as shown on birth			Middle Name(s)	FemaleX Male	
	Proposed Name	Surname	Given Name		Middle Name(s)		
	Date and Place of Birth	YYYY MM DD	City / Town	Province / State	Countr	у	
		Street		City / Town			
	Current Address and Telephone	Mailing Address (if different	from above)				
		Province / State Posta	I Code Country	Phone Number	Email		

	Documentation						
2		Original Birth Certificate (if born in Canada) If born in NL and have a Government issued Birth Certificate in your possession it must be returned with your application.					
	Proof of	If born outside NL, but within Canada, a Government issued Birth Certificate is required.					
	Birth	If born outside Canada, certified copies of Immigration and/or Citizenship documents are required.					
		Birth Registration Number					
		Certified copy of Immigration and Citizenship Documents (if born outside Canada) Enclosed					
	Criminal Record	As per section 10(2)(c.1) of the Change of Name Act, 2009, a criminal record check must be obtained and provided as part of your application. This record check can be obtained from the Royal Newfoundland Constabulary (RNC), Royal Canadian Mounted Police (RCMP) or another organization approved by the Minister of Digital Government and Service NL. The Minister has approved the Commissionaires to provide a criminal record check for purposes of a Change of Name application.					
	Check	Please note, if a record check discloses that the applicant has been convicted of an offence listed in section 2(1)(f.1) of the Change of Name Act, 2009, the application will be provided to the Minister to determine whether to grant or refuse the change of name. Criminal Record Check Enclosed					

#### **Newfoundland and Labrador Gazette Publication**

3		I hereby request an exemption, pursuant to Section 14(2) of the <b>Change of Name Act, 2009</b> to the requirement to publish the change of name in the Newfoundland and Labrador Gazette on the following ground(s):					
	Request for Exemption from Publication	I would be unduly prejudiced or embarrassed by the publication. (Please provide reasons in a sealed envelope for Registrar's review)					
		The change of name applied for is of a minor effect.					
		I have been commonly known under the new name. (Please provide copy of IDs showing usage of new name)					

		ge of name for myself, a notice of the change of name will be published in request for exemption has been approved. I acknowledge that this notice wi mmunity.					
	AFFIDAVIT OF GOOD FAITH						
Applicant's Statutory	I,						
Declaration	Current Legal Name						
	of						
	in the Province of Newfoundland and Labrador, DC	SOLEMNLY SWEAR / AFFIRM:					
	1. That I am the applicant named in the above application which I make in good faith without intention to de conceal my previous identity for an improper purpose.						
	2. That I have been ordinarily resident in the Province of Newfoundland and Labrador for at least three (						
	3. That I am aware that notice of my change of name may be provided to peace officers, as well as other public officers of departments and agencies of Government.						
	4. That I have read the application for a change of name and, to the best of my knowledge, information, and belief, the statements made therein are true in substance and in fact.						
	AND I MAKE THIS SOLEMN DECLARATION conscientiously believing it to be true, and knowing that it is of the se effect as if made under oath and by virtue of the <b>Canada Evidence Act</b> .						
	SWORN TO / AFFIRMED before me	Signature of Applicant					
	at						
	in the of						
	this day of,						
	Commissioner of Oaths / Justice of the Peace / Notary Public with raised seal. If completed <b>outside</b> Newfoundland and Labrador, must be witnessed by Notary Public with raised seal.						

## **Request for Change of Name on Marriage Registration**

Marital Status	Married Widowed Divorced Married Surname						
and Details	Date of Marriage	ҮҮҮҮ ММ	D D Place City /	of Marriage Town		Province / State	Country
Proof of Marriage		I have a Governmen with your application Application form. Request for Man	n. You may ap riage Certifica	iage Certificate in your pose oply for a new copy with a se ne attached not have a Marriage Certif	eparate	Marriage Registration No	
Consent of Spouse	I, being amended to r	reflect my spouse's r	new name.	the s	pouse of	the applicant hereby conse	ent to the marriage registration

Please return completed form to Vital Statistics Division, Digital Government and Service NL, P. O. Box 8700, St. John's, NL Canada A1B 4J6. Telephone: (709) 729-3308.

### PRIVACY NOTICE

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The information on this form is collected under Section 10 of the authority of the **Change of Name Act**, **2009** SNL 2009 c.C-8.1 and will be used to fulfill the requirements of the **Change of Name Act**, **2009**. Any release of this information will be in compliance with **Change of Name Act**, 2009 and the **Access to Information and Protection of Privacy Act**. If you have any question about the collection or use of this information, please contact a Vital Statistics representative at 709-729-3308.