

Child Name Change

(One parent filing—Other parent dead or rights terminated)

Use these instructions & forms if:

- one parent is filing request and other parent has died or has had parental rights terminated

This packet includes:

1. Instructions for a Child Name Change - One parent filing
2. Petition to Change the Name of Child
3. Child's Consent to Name Change
4. Order to Change the Name of Child
5. Civil Case Information Sheet
6. Statement of Inability to Afford Payment of Court Costs
7. Information on Suit Affecting the Family Relationship

Note: You may not need all of the forms listed or you may need additional forms. Get more information at www.TexasLawHelp.org. Talk to a lawyer if you have questions.

Instructions & Forms for Child Name Change - One parent filing - Other parent dead or rights terminated

Warning: *The information and forms in this guide are not a substitute for the advice and help of a lawyer.*

These instructions explain the steps to change a child's name if you are the child's parent **and**:

- the other parent is dead **OR** the other parent's parental rights were terminated by a court **and**
- no other person has a court ordered relationship with the child.

You can also use these instructions and forms if you are the child's nonparent sole managing conservator or legal guardian and:

- **both parents** are either 1) dead or 2) had their parental rights terminated by a court **and**
- no other person has a court ordered relationship with the child.

A lawyer is trained to protect your legal rights. Even if you decide to represent yourself, try to talk to a lawyer about your case before filing anything. Visit the [Legal Help Directory](#) or [Working with a Private Attorney](#) for more information.

To print out both the instructions and forms, [click here](#).

Checklist Steps

- Step 1: Fill out the Petition and other starting court forms.**

Fill out these forms:

- [Petition to Change the Name of a Child](#)

This form asks a judge to change a child's name. You must sign this form **under penalty of perjury**. This means you could be charged with a crime if you lie on this form.

Print your answers using blue or black ink. Do not leave blanks.

Who is the petitioner?

You are the petitioner – the person asking the court to change the child’s name. Note: You MUST be a parent or nonparent managing conservator or legal guardian to ask for a child’s name to be changed.

Who must be listed as a respondent in the Petition to Change the Name of a Child?

If you are the child’s parent, you must list the other parent as a respondent. If you are a non-parent managing conservator or legal guardian of the child, you must list both parents as respondents.

Important: Do not use these instructions if anyone else has a court ordered relationship with the child.

What if a parent is dead?

If a parent is dead, you will check the box that says the parent is deceased and attach a copy of the parent’s death certificate. (Keep the original death certificate. You will need it when you go to court.)

What if a parent’s parental rights were terminated?

If a parent’s parental rights were terminated, check the box that says the parent’s parental rights were terminated and attach a copy of a certified copy of the court order that terminated the parent’s rights. (Note: Keep the actual certified copy of the court order. You will need it when you go to court.)

What if I don’t know the identity of the other parent?

Do NOT use these instructions if you don’t know the identity of a parent. Use these instructions instead: [Instructions & Forms for Child Name Change - One parent filing - Other parent will be served](#). You must have the “Unknown Father” served by publication.

What if I can’t find the other parent?

Do NOT use these instructions if you can’t find a parent. Use these instructions instead: [Instructions & Forms for Child Name Change - One parent filing - Other parent will be served](#). If you can’t find a parent, you must have the parent served by publication.

- [Order Changing the Name of a Child](#)

You will ask the judge to sign this form to change the child’s name. Fill out all blanks except: 1) the date of judgment, 2) the judge’s signature and 3) the judge’s name.

You must also sign this form.

- [Civil Case Information Sheet](#) (NOTE: the [Texas Supreme Court has repealed the rule requiring the civil case information sheet](#), so you may not need this form).

Fill out this additional form if the child is 10 years old or older:

- [Child's Consent to Name Change \(For Child Age 10 or Older\)](#)

This form must be signed by the child if the child is 10 years old or older. It tells the judge that the child wants his or her name to be changed. **Note:** If the child is 10 years old or older and does not want a name change, you can't change his or her name.

Fill out this additional form if you cannot afford to pay the filing fee for your case. Call the clerk's office in the county where the child lives to learn the filing fee for your case.

- [Statement of Inability to Afford Payment of Court Costs](#)

Tip: It's a good idea to have a lawyer review your forms after you fill them out. You can hire a lawyer just to review your forms. This is called "limited scope representation." Use our **Legal Help Directory** tool to search for legal help in your area. Or, if your income is low, you may be able to have your completed forms reviewed at a free legal clinic. Use our [Legal Events and Clinics](#) to search for a free legal clinic in your area.

Step 2: Make copies.

Make one copy of the following forms:

- your completed Petition to Change the Name of a Child, **and**
- your Statement of Inability to Afford Payment of Court Costs (if you cannot afford the filing fee), **and**
- the child's completed Child's Consent to Name Change (if the child is 10 or older).

You do not need copies of the Civil Case Information Sheet form, the Information on Suit Affecting the Family Relationship form, or the Order Changing the Name of a Child form.

Step 3: File (turn in) your Petition and other starting forms.

File (turn in) your completed forms at the district clerk's office in the county where your child lives.

At the clerk's office:

- Turn in your completed court forms (and copies), except the Order Changing the Name of a Child form.
- Pay the filing fee or file your completed Statement of Inability to Afford Payment of Court Costs if you cannot afford the fee.
- The clerk will write your "Cause Number" and "Court Number" at the top of the first page of your Petition to Change the Name of a Child and other forms. (Write these numbers at the top of your Order Changing the Name of a Child form.)
- The clerk will "file-stamp" your copies with the date and time.
- Ask the clerk if there are local rules or procedures you need to know about for your case.
- Ask the clerk when you can present your proposed Order Changing the Name of a Child to a judge. You may be able to present your proposed order to a judge that day. Or you may have to come back another day.

Step 4: Go to court to finish your case.

Go to court to finish your case. Read the article [Tips for the Courtroom](#) for more information about going to Court.

When you get to the courtroom, tell the judge's clerk you are there and give the clerk the following documents:

- your proposed Order Changing the Name of a Child, **and**

- the file-stamped copy of your Petition to Change the Name of a Child, **and**
- the file-stamped copy of the Child's Consent to Name Change (if applicable), **and**
- if a parent is dead, the parent's death certificate, **and**
- if a parent's parental rights were terminated, your certified copy of the court order terminating the parent's rights, **and**
- if you are not the child's parent, a copy of the court order naming you as the child's managing conservator or legal guardian.

Sit down until the judge calls your case.

When the judge calls your case, walk to the front of the courtroom and stand in front of the judge's bench. The judge will have you raise your right hand and swear to tell the truth. Tell the judge who you are and whether you are the child's parent or the child's nonparent managing conservator or legal guardian. Tell the judge you are asking that the child's name be changed. Be prepared to quickly tell the judge why you think changing the child's name is in the child's best interest.

The judge will listen to what you say and review your forms. If everything is in order and the judge agrees that changing the child's name would be in the child's best interest, the judge will sign your Order Changing the Name of a Child.

Step 5: File the signed Order with the clerk.

After the judge signs your Order Changing the Name of a Child, go back to the clerk's office.

- File (turn in) the signed Order Changing the Name of a Child. **Your case is NOT final until you do so.**
- Get several certified copies of the Order from the clerk. You must pay a small fee for each certified copy. You will need certified copies of the Order to change the child's name on the child's social security card, birth certificate, passport, school records, etc. Each agency will want a certified copy of the Order to keep. You will also want a certified copy of the Order for your records.

- File the completed [Information on Suit Affecting the Family Relationship](#) form.

Step 6: After your case is finished.

You are responsible for notifying the appropriate agencies of the child's new name.

- To change the child's social security card, contact your local social security office.
- To change your child's Texas birth certificate, contact the Texas Department of State Health Services, Vital Statistics Unit. Read about birth certificate amendments and get the application [here](#). If your child was born in another state, contact the vital statistics office in that state.
- To change the child's passport, contact your local passport office.
- To change the child's school records, take a certified copy of the Order to the child's school.

Cause Number: _____

In the Matter of the Name Change of:

In the _____

District Court County Court at Law

(Print the child's current name - first, middle, last.)

_____ County, Texas

A Child

Petition to Change the Name of a Child

1. Discovery Level

The discovery level in this case, if needed, is Level 2.

2. Petitioner

My name is: _____
First Middle Last

I am the **Petitioner**, the person asking the Court to change the name of a child.

The last three numbers of Petitioner's driver's license number are: _____.

Petitioner's driver's license was issued in (state) _____.

Or I do not have a driver's license.

The last three numbers of my social security number are: _____.

Or I do not have a social security number.

I am the child's parent.

3. No Respondent Party

There is no Respondent because: *(Check one.)*

the child's other parent is dead. *(Attach a copy of the death certificate.)*

the child's other parent's parental rights have been terminated by court order. *(Attach a copy of the court order of termination.)*

No other person has a legal relationship with the child.

4. Child's Information

The child's information is as follows:

a. Child's Current name: _____
First Middle Last

b. Home Address: _____ County: _____

c. Social Security #: _____ - _____ - _____ **or** The child does not have a Social Security #.

d. Birth date: _____
Month / Day / Year

e. Place of birth: _____
City State Country

f. Consent by Child *(Check one.)*

Child is younger than 10 years old. Consent is not required.

Child is 10 years old or older and has consented in writing to this name change.

g. Sex Offender Registration (*Check one.*)

The child **is not** required to register as a sex offender.

The child **is** required to register as a sex offender. Proof that the child has notified local law enforcement of the proposed name change is attached to this Petition. The requested name change is in the best interest of the public.

h. Are there any court orders about the child already in place? (*Check one.*)

There are no court orders regarding the child.

A court made orders involving the child in the following case:

Case/Cause Number _____ in _____ County State _____

Case type: _____
Print the case type (custody, support, divorce, paternity, etc.)

5. Name Change Request

a. I ask the Court to change the child's name to:

_____ *First* _____ *Middle* _____ *Last*

b. I want to change the child's name because:

c. I believe the requested name change is in the child's best interest.

6. Request for Judgment

I ask the Court to order the child's name changed as requested above. I ask for general relief.

Respectfully submitted,



Your Signature

Date

Your Printed Name

Phone

Mailing Address

City _____ *State* _____ *Zip*

Email Address: _____

Fax #
(if any)

7. Petitioner’s Declaration Under Penalty of Perjury

My name is:_____. My date of birth is_____.

My address is: _____.

My email address is_____. My phone number is:_____.

I declare under penalty of perjury that all information in this Petition to Change the Name of a Child is true and correct.

Completely and formally signed on: _____
Date County

State of: _____

▶ **Your signature** _____

Cause Number: _____

In the Matter of the Name Change of:

In the _____

District Court County Court at Law

Print the child's current name - first, middle, last.

_____ County, Texas

A Child

Child's Consent to Change Name (For Child Age 10 or Older)

Print your answers

1. My name is _____
first middle last

2. My age is _____

3. The name change is for me.

4. I want my name changed to

_____ *First middle last*

Child **prints** his/her current name here: _____



Child **signs** here _____

_____ Date the child signed

Cause Number: _____

In the Matter of the Name Change of:

In the _____

District Court County Court at Law

(Print the child's current name - first, middle, last.)

_____ County, Texas

A Child

Order Changing the Name of a Child

A hearing took place on (date) _____.

1. Appearances

Petitioner

Petitioner's name is: _____

Petitioner is the child's parent.

Petitioner was present, representing him/herself, and announced ready.

No Respondent Party

There is no Respondent because: (Check one.)

the child's other parent is dead. A copy of the other parent's death certificate is attached to this Order as Exhibit 1. No other person has a legal relationship with the child.

the child's other parent's parental rights have been terminated by court order. A copy of the court order of termination is attached to this Order as Exhibit 1. No other person has a legal relationship with the child.

2. Record (The Court fills out this section.)

A Court reporter recorded today's hearing.

A Court reporter did not record today's hearing because the parties and judge agreed not to make a record.

3. Jurisdiction

The Court finds that it has jurisdiction over this case and the child and that all persons entitled to citation were properly cited.

4. Findings

The Court finds that:

a. The child's current name is: _____
First Middle Last

b. The child was a resident of this county at the time this case was filed.

c. The child's birth date is: _____
Month / Day / Year

d. The child's place of birth is _____
City State Country

e. The child's social security # is: _____ **or** The child does not have a social security number.

f. Consent by Child (*Check one.*)

The child is younger than 10 years old. Consent is not required.

The child is 10 years old or older and has consented in writing to this name change.

g. Sex Offender Registration (*Check one.*)

The child **is not** required to register as a sex offender.

The child **is** required to register as a sex offender. Petitioner attached proof to the Petition that the child notified local law enforcement of the proposed name change. The requested name change is in the best interest of the public.

h. Court of Continuing Exclusive Jurisdiction (*Check one.*)

There are no court orders regarding the child.

A court made orders involving the child in the following case:

_____ *Case Number County State Case type (custody, support, divorce etc.)*

i. The requested name change is in the best interest of the child.

5. Orders


The Court ORDERS that the child's name is changed

from this name: _____
First Middle Last

to this name: _____
First Middle Last

Any orders requested that do not appear above are denied. This is a final order.

Date of Judgment



Judge's Signature

Judge's Printed Name

BY SIGNING BELOW, I AGREE TO THE FORM AND SUBSTANCE OF THIS ORDER CHANGING THE NAME OF A CHILD:

Petitioner: 

Petitioner's Signature

CIVIL CASE INFORMATION SHEET

CAUSE NUMBER (FOR CLERK USE ONLY): _____ COURT (FOR CLERK USE ONLY): _____

STYLED _____
 (e.g., John Smith v. All American Insurance Co; In re Mary Ann Jones; In the Matter of the Estate of George Jackson)

A civil case information sheet must be completed and submitted when an original petition or application is filed to initiate a new civil, family law, probate, or mental health case or when a post-judgment petition for modification or motion for enforcement is filed in a family law case. The information should be the best available at the time of filing. This sheet, approved by the Texas Judicial Council, is intended to collect information that will be used for statistical purposes only. It neither replaces nor supplements the filings or service of pleading or other documents as required by law or rule. The sheet does not constitute a discovery request, response, or supplementation, and it is not admissible at trial.

1. Contact information for person completing case information sheet:	Names of parties in case:	Person or entity completing sheet is:
Name: _____ Email: _____ Address: _____ Telephone: _____ City/State/Zip: _____ Fax: _____ Signature: _____ State Bar No: _____	Plaintiff(s)/Petitioner(s): _____ Defendant(s)/Respondent(s): _____ _____ _____ _____ _____ _____	<input type="checkbox"/> Attorney for Plaintiff/Petitioner <input type="checkbox"/> <i>Pro Se</i> Plaintiff/Petitioner <input type="checkbox"/> Title IV-D Agency <input type="checkbox"/> Other: _____ Additional Parties in Child Support Case: Custodial Parent: _____ Non-Custodial Parent: _____ Presumed Father: _____
[Attach additional page as necessary to list all parties]		

2. Indicate case type, or identify the most important issue in the case (select only 1):				
Civil			Family Law	
Contract	Injury or Damage	Real Property	Marriage Relationship	Post-judgment Actions (non-Title IV-D)
<input type="checkbox"/> Debt/Contract <input type="checkbox"/> Consumer/DTPA <input type="checkbox"/> Debt/Contract <input type="checkbox"/> Fraud/Misrepresentation <input type="checkbox"/> Other Debt/Contract: _____ <input type="checkbox"/> Foreclosure <input type="checkbox"/> Home Equity—Expedited <input type="checkbox"/> Other Foreclosure <input type="checkbox"/> Franchise <input type="checkbox"/> Insurance <input type="checkbox"/> Landlord/Tenant <input type="checkbox"/> Non-Competition <input type="checkbox"/> Partnership <input type="checkbox"/> Other Contract: _____	<input type="checkbox"/> Assault/Battery <input type="checkbox"/> Construction <input type="checkbox"/> Defamation <i>Malpractice</i> <input type="checkbox"/> Accounting <input type="checkbox"/> Legal <input type="checkbox"/> Medical <input type="checkbox"/> Other Professional Liability: _____ <input type="checkbox"/> Motor Vehicle Accident <input type="checkbox"/> Premises <i>Product Liability</i> <input type="checkbox"/> Asbestos/Silica <input type="checkbox"/> Other Product Liability List Product: _____ <input type="checkbox"/> Other Injury or Damage: _____	<input type="checkbox"/> Eminent Domain/Condemnation <input type="checkbox"/> Partition <input type="checkbox"/> Quiet Title <input type="checkbox"/> Trespass to Try Title <input type="checkbox"/> Other Property: _____ Related to Criminal Matters <input type="checkbox"/> Expunction <input type="checkbox"/> Judgment Nisi <input type="checkbox"/> Non-Disclosure <input type="checkbox"/> Seizure/Forfeiture <input type="checkbox"/> Writ of Habeas Corpus—Pre-indictment <input type="checkbox"/> Other: _____	<input type="checkbox"/> Annulment <input type="checkbox"/> Declare Marriage Void <i>Divorce</i> <input type="checkbox"/> With Children <input type="checkbox"/> No Children Other Family Law <input type="checkbox"/> Enforce Foreign Judgment <input type="checkbox"/> Habeas Corpus <input type="checkbox"/> Name Change <input type="checkbox"/> Protective Order <input type="checkbox"/> Removal of Disabilities of Minority <input type="checkbox"/> Other: _____	<input type="checkbox"/> Enforcement <input type="checkbox"/> Modification—Custody <input type="checkbox"/> Modification—Other Title IV-D <input type="checkbox"/> Enforcement/Modification <input type="checkbox"/> Paternity <input type="checkbox"/> Reciprocals (UIFSA) <input type="checkbox"/> Support Order Parent-Child Relationship <input type="checkbox"/> Adoption/Adoption with Termination <input type="checkbox"/> Child Protection <input type="checkbox"/> Child Support <input type="checkbox"/> Custody or Visitation <input type="checkbox"/> Gestational Parenting <input type="checkbox"/> Grandparent Access <input type="checkbox"/> Parentage/Paternity <input type="checkbox"/> Termination of Parental Rights <input type="checkbox"/> Other Parent-Child: _____
Employment	Other Civil			
<input type="checkbox"/> Discrimination <input type="checkbox"/> Retaliation <input type="checkbox"/> Termination <input type="checkbox"/> Workers' Compensation <input type="checkbox"/> Other Employment: _____	<input type="checkbox"/> Administrative Appeal <input type="checkbox"/> Antitrust/Unfair Competition <input type="checkbox"/> Code Violations <input type="checkbox"/> Foreign Judgment <input type="checkbox"/> Intellectual Property	<input type="checkbox"/> Lawyer Discipline <input type="checkbox"/> Perpetuate Testimony <input type="checkbox"/> Securities/Stock <input type="checkbox"/> Tortious Interference <input type="checkbox"/> Other: _____		
Tax	Probate & Mental Health			
<input type="checkbox"/> Tax Appraisal <input type="checkbox"/> Tax Delinquency <input type="checkbox"/> Other Tax	<i>Probate/Wills/Intestate Administration</i> <input type="checkbox"/> Dependent Administration <input type="checkbox"/> Independent Administration <input type="checkbox"/> Other Estate Proceedings		<input type="checkbox"/> Guardianship—Adult <input type="checkbox"/> Guardianship—Minor <input type="checkbox"/> Mental Health <input type="checkbox"/> Other: _____	

3. Indicate procedure or remedy, if applicable (may select more than 1):		
<input type="checkbox"/> Appeal from Municipal or Justice Court <input type="checkbox"/> Arbitration-related <input type="checkbox"/> Attachment <input type="checkbox"/> Bill of Review <input type="checkbox"/> Certiorari <input type="checkbox"/> Class Action	<input type="checkbox"/> Declaratory Judgment <input type="checkbox"/> Garnishment <input type="checkbox"/> Interpleader <input type="checkbox"/> License <input type="checkbox"/> Mandamus <input type="checkbox"/> Post-judgment	<input type="checkbox"/> Prejudgment Remedy <input type="checkbox"/> Protective Order <input type="checkbox"/> Receiver <input type="checkbox"/> Sequestration <input type="checkbox"/> Temporary Restraining Order/Injunction <input type="checkbox"/> Turnover

NOTICE: THIS DOCUMENT CONTAINS SENSITIVE DATA
AVISO: ESTE DOCUMENTO CONTIENE INFORMACIÓN CONFIDENCIAL



Statement of Inability to Afford Payment of Court Costs or an Appeal Bond

Declaración sobre Incapacidad de Pago de Costas de Tribunal o de una Fianza de Apelación

Cause Number
Número de Caso

The Clerk's office will fill in the Cause Number when you file this form.

El Secretario del Tribunal anotará el Número de Caso cuando usted presente este formulario.

v.

Copy information listed at the top left of the petition here.

Copie aquí la información ubicada en la parte superior izquierda del escrito de la demanda.

Copy information listed at the top right of the petition here.

Copie aquí la información ubicada en la parte superior derecha del escrito de la demanda.

Court Number
Número del Tribunal

_____, Texas
County
Condado

- District Court
Tribunal de Distrito
- County Court
Tribunal del Condado
- County Court at Law
Tribunal Estatutario
- Justice Court
Juzgado de Paz
- Probate Court
Juzgado Sucesorio

1. Your Information / Su Información

- My full legal name is / Mi nombre legal completo es

First Middle Last / Nombre de Pila Segundo Nombre Apellido

- My date of birth is / Mi fecha de nacimiento es

Month Day Year / Mes Día Año

- My address is / Mi dirección es

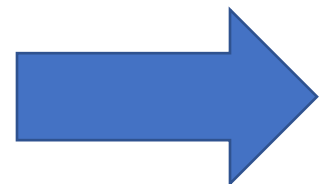
Home / Domicilio _____

Mailing / Dirección Postal _____

- My phone number / Mi número telefónico _____

- My email I check often / Mi correo electrónico que reviso con frecuencia

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Pase a la siguiente página

2. About My Dependents / Mis Dependientes

“The people who depend on me financially are listed below.” **Use initials only for children under 18.** If needed, attach a separate piece of paper to list more dependents.

“Las personas a continuación dependen económicamente de mí.” **Use iniciales para los menores de 18 años** y, si es necesario, anexe una hoja por separado para enumerar a todos sus dependientes.

Name Nombre	Age Edad	Relationship to me Parentesco Conmigo

3. Are you represented by Legal Aid? ¿Está siendo representado por alguna entidad de asistencia legal?

Check only one box. Seleccione solo una casilla.

I am being represented in this case for free by an attorney who works for a legal aid provider or who received my case through a legal aid provider. I have attached the certificate the legal aid provider gave me as “Exhibit: Legal Aid Certificate.”

Me está representando gratuitamente un abogado que trabaja para una entidad de asistencia legal o que recibió mi caso de una entidad de asistencia legal. El certificado que la entidad de asistencia legal me entregó lo adjunto bajo el título, “Anexo: Certificado de Asistencia Legal.”

or / o

I am not represented by legal aid.

No me está representando ninguna entidad de asistencia legal.



4. Public Benefits / Beneficios de Asistencia Pública

- Do you or any of your dependents receive public benefits?
¿Recibe usted o sus dependientes beneficios de asistencia pública?

Yes / *Sí*

No / *No*

- If you answered yes, check all that apply and attach proof to this form, such as a copy of an eligibility form or check.

Si respondió con un Sí, marque todas las casillas que apliquen y adjunte a este formulario comprobantes, tales como una copia de la carta autorizando que reciba estos beneficios o una copia del cheque que recibe.

Food stamps/SNAP
Cupones de comida/SNAP

TANF

Medicaid

CHIP

SSI/SSDI

WIC

Lifeline

Public Housing or Section 8 Housing
Asistencia de Vivienda / Programa de Vivienda bajo Sección 8

Low-Income Home Energy Assistance
Asistencia con Energía Eléctrica

Community Care via HHS
Ayuda Comunitaria bajo HHS

LIS in Medicare (“Extra Help”)
Subsidio Adicional de Medicare bajo el Programa LIS

Needs-based VA Pension
Pensión para Veteranos de Guerra en función a necesidades

Child Care Assistance under Child Care and Development Block Grant
Asistencia con Guardería bajo el Programa CCDBG

County Assistance, County Health Care, or General Assistance (GA)
Asistencia del Condado, Asistencia Médica del Condado, o Asistencia General (GA)

Other / *Otros beneficios*

Other / *Otros beneficios*



5. What are your monthly income sources? ¿Cuáles son sus fuentes de ingresos mensuales?

➤ My **take-home** pay is \$_____ in monthly wages.

Mi **pago neto** es \$_____ en sueldo mensual.

➤ I work as a _____ (your job title) for _____ (your employer).

Yo trabajo como _____ (título de su puesto) para _____ (compañía o jefe).

➤ \$_____ is my total **monthly** income / son mis ingresos totales **al mes**.

These are my income sources. Estas son mis fuentes de ingresos.

➤ \$_____ in unemployment / en beneficios de desempleo.

I have been unemployed since _____ (date).

He estado desempleado desde _____ (indique fecha).

➤ \$_____ in public benefits / en beneficios de Asistencia Pública.

➤ \$_____ from people in my household other than my spouse / de ingresos de otras personas en mi hogar que no son de mi cónyuge.

➤ \$_____ from retirement or pension / de jubilación o pensión.

➤ \$_____ from tips or bonus / de propinas o bonos.

➤ \$_____ from disability / de discapacidad.

➤ \$_____ from worker's comp / de compensación al trabajador.

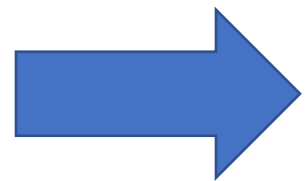
➤ \$_____ from social security / de seguro social.



- \$ _____ from military housing / de vivienda militar.
- \$ _____ from dividends, interest, or royalties / de dividendos, intereses, o regalías.
- \$ _____ from child or spousal support / de manutención de menores o manutención conyugal recibida.
- Answer only if your spouse is not your opponent. Responda tan sólo si su ccónyuge no es parte contraria en esta causa legal. \$ _____ from my spouse's income / de ingresos de mi cónyuge.
- \$ _____ from other jobs/sources of income / de otros trabajos/ fuentes de ingresos.

Describe / describa:

Go to next page



Pase a la siguiente página

6. What is the value of your assets or property? ¿Cuál es el valor de sus bienes o propiedades?

My property includes: Mis bienes incluyen:	Value / Valor
	<p>The value is the amount the item would sell for less the amount you still owe on it, if anything.</p> <p>El valor de sus bienes es la cantidad por la que la propiedad o pertenencia se vendería, menos el monto que aún se adeuda, si lo hubiera.</p>
➤ Cash Dinero en efectivo	\$
➤ Bank accounts, other financial assets Cuentas bancarias, otros bienes financieros	
	\$
	\$
	\$
➤ Cars and boats (make and year) Automóviles, lanchas (modelo y año)	
	\$
	\$
	\$
➤ Other property like jewelry, stocks, land, a second house. (Do not list your homestead.)	
Otros bienes como joyas, acciones, terrenos, una segunda casa. (No indique su hogar familiar.)	
	\$
	\$
	\$
Total Value of Property Valor Total de Sus Bienes	\$ 0



**7. What are your monthly expenses that are not deducted from your paycheck?
¿Cuáles son sus gastos mensuales que no son descontados de su cheque de sueldo?**

My monthly expenses are: Mis gastos mensuales son:	Amount Cantidad
➤ Rent/house payments; maintenance Alquiler/hipoteca; mantenimiento de casa	\$
➤ Food and household supplies Alimentos y artículos para el hogar	\$
➤ Utilities and telephone Luz, gas, agua y teléfono	\$
➤ Clothing and laundry Ropa y lavado de ropa	\$
➤ Medical and dental expenses Gastos médicos y dentales	\$
➤ Insurance (life, health, auto, etc.) Seguros (de vida, médico, de automóvil etc.)	\$
➤ School and childcare Escuelas y guarderías	\$
➤ Transportation, auto repair, gas Transportación, reparaciones de automóviles, gasolina	\$
➤ Child/Spousal support Manutención a Menores/Manutención Conyugal	\$
➤ Debt payments to (list): Pagos por deudas hechas a (indíquelos):	
	\$
	\$
➤ Wages withheld by court order Sueldo retenido por orden judicial	\$
➤ Other expenses (list): Otros gastos (indíquelos):	
	\$
	\$
Total Monthly Expenses Gastos Totales Mensuales	\$ 0



**8. Are there debts or other facts explaining your financial situation?
¿Hay deudas u otros factores que expliquen su situación económica?**

My debts include (list debt and amount owed):

Mis duedas incluyen (indique deuda y la cantidad que debe):

	\$
	\$
	\$
	\$
	\$

If you want the court to consider other facts, such as unusual medical expenses, family emergencies, etc., attach another page to this form labeled "Exhibit: Additional Supporting Facts."

Si usted desea que el tribunal considere otros factores, tales como gastos médicos excepcionales, emergencias familiares, etc., adjunte al formulario otra hoja con esta información y bajo el título, "Anexo: Información Adicional de Apoyo."

9. Ability to Pay Court Costs. Declaración sobre su Habilidad de Pagar Costas de Tribunal

Check only one box. Seleccione tan solo una casilla.

- I cannot afford to pay court costs. No puedo pagar las costas de tribunal.
- I cannot furnish an appeal bond or pay a cash deposit to appeal a justice court decision, and I cannot afford to pay court costs.

No puedo aportar una fianza de apelación ni pagar un depósito en efectivo para apelar la decisión judicial de un magistrado, y no puedo pagar costas de tribunal.

Go to next page



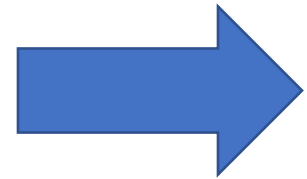
Pase a la siguiente página

10. Declaration/Affidavit. Declaración Escrita Bajo Juramento.

Fill out **only one** box. If you fill out the Declaration, you will not need to sign the form in front of a notary public. If you do not want to list your address for privacy or safety concerns, take the form and photo identification, and fill out the Affidavit box in front of a notary public.

Llene tan **solo una** opción. Si usted llena la Declaración, no necesitará firmar el formulario ante un notario. Si usted no quiere que aparezca su domicilio en el documento para conservar su privacidad o por motivos de su seguridad, lleve el formulario y una identificación con fotografía y llene la sección de la Declaración Escrita Bajo Juramento ante un Notario.

Go to next page



Pase a la siguiente página

Option 1 / Opción 1

Declaration: I declare under penalty of perjury that the foregoing is true and correct.

Declaración: Yo declaro bajo pena de perjurio que la información a continuación es correcta y verdadera.

➤ My name is / Mi nombre es

➤ My date of birth is / Mi fecha de nacimiento es

____/____/____

➤ My address is / Mi domicilio es

Street, city, zip, country

Calle y número, ciudad, estado, código postal, país

➤

Signature
Firma

➤

Date (month, day, year)
Fecha (mes, día, año)

➤

County, state
Condado, estado

Go to next page



Pase a la siguiente página

Option 2 / Opción 2

Affidavit: I swear under penalty of perjury that the foregoing is true and correct.

Declaración Escrita Bajo Juramento: Yo juro bajo pena de perjurio, que lo que precede es correcto y verdadero.

You fill out this section.
Usted llena esta sección.

➤ _____
Your printed name
Su nombre en letra de molde

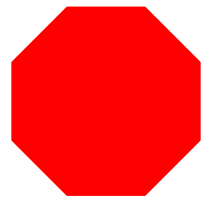
➤ _____
Your signature
Su firma

The notary fills out this section.
El Notario llena esta sección.

➤ _____
Subscribed before me this day of
Juramentado y suscrito ante mí el día de hoy del mes de

_____, 20____

NOTARY
NOTARIO



**INFORMATION ON SUIT AFFECTING THE FAMILY RELATIONSHIP
(EXCLUDING ADOPTIONS)**

SECTION I GENERAL INFORMATION (REQUIRED)

STATE FILE NUMBER

1a. COUNTY _____ 1b. COURT NO. _____
1c. CAUSE NO. _____ 1d. DATE OF ORDER (mm/dd/yyyy) _____

2. TYPE OF ORDER (CHECK ALL THAT APPLY):

- DIVORCE/ANNULMENT WITH CHILDREN (Sec. 1,2 AND 3) DIVORCE/ANNULMENT WITHOUT CHILDREN (Sec 1 AND 2)
- ESTABLISHMENT OF COURT OF CONTINUING JURISDICTION (SEC 1 AND 3)
(Court Order Establishing Paternity, Conservatorship, Child Support or Termination of Parental Rights)
- CHANGE IN THE NAME OF THE CHILD (SEC 1 AND 3)
(PROVIDE PRIOR AND NEW NAME OF CHILD IN SECTION 3)
- TRANSFER OF COURT OR CONTINUING JURISDICTION (SEC1,3 AND INFORMATION BELOW)

TRANSFER TO: COUNTY _____ COURT NO. _____ STATE COURT ID# _____

3a. NAME OF ATTORNEY FOR PETITIONER	3b. TELEPHONE NUMBER (including area code)
3c. CURRENT MAILING ADDRESS (STREET AND NUMBER OR P.O BOX, CITY, STATE, ZIP)	

SECTION 2 (IF APPLICABLE) REPORT OF DIVORCE OR ANNULMENT OF MARRIAGE

PETITIONER	4. NAME (FIRST MIDDLE LAST SUFFIX)		5. MAIDEN LAST NAME (NAME BEFORE 1 ST MARRIAGE)	
	6. PLACE OF BIRTH (CITY AND STATE OR FOREIGN COUNTRY)		7. RACE	8. DATE OF BIRTH (mm/dd/yyyy)
	9. USUAL RESIDENCE	STREET NAME & NUMBER	CITY	STATE
RESPONDENT	10. NAME (FIRST MIDDLE LAST SUFFIX)		11. MAIDEN LAST NAME (NAME BEFORE 1 ST MARRIAGE)	
	12. PLACE OF BIRTH (CITY AND STATE OR FOREIGN COUNTRY)		13. RACE	14. DATE OF BIRTH (mm/dd/yyyy)
	15. USUAL RESIDENCE (STREET AND NUMBER CITY, STATE, ZIP)			
16. NUMBER OF MINOR CHILDREN		17. DATE OF MARRIAGE (mm/dd/yyyy)		18. PLACE OF MARRIAGE (CITY AND STATE OR FOREIGN COUNTRY)

SECTION 3 (IF APPLICABLE) CHILDREN AFFECTED BY THIS SUIT

CHILD 1	19a. CHILD CURRENT NAME (FIRST MIDDLE LAST SUFFIX)			
	19b. DATE OF BIRTH (mm/dd/yyyy)	19c. SEX	19d. BIRTHPLACE (CITY, COUNTY AND STATE)	
	19e. PRIOR NAME OF CHILD (FIRST MIDDLE LAST SUFFIX) – IF APPLICABLE			
CHILD 2	20a. CHILD CURRENT NAME (FIRST MIDDLE LAST SUFFIX)			
	20b. DATE OF BIRTH (mm/dd/yyyy)	20c. SEX	20d. BIRTHPLACE (CITY, COUNTY AND STATE)	
	20e. PRIOR NAME OF CHILD (FIRST MIDDLE LAST SUFFIX) – IF APPLICABLE			
CHILD 3	21a. CHILD CURRENT NAME (FIRST MIDDLE LAST SUFFIX)			
	21b. DATE OF BIRTH (mm/dd/yyyy)	21c. SEX	21d. BIRTHPLACE (CITY, COUNTY AND STATE)	
	21e. PRIOR NAME OF CHILD (FIRST MIDDLE LAST SUFFIX) – IF APPLICABLE			

ADDITIONAL CHILDREN LISTED ON BACK OF THE FORM.

I CERTIFY THAT THE ABOVE ORDER WAS GRANTED ON THE DATE AND PLACE AS STATED. _____
SIGNATURE OF THE CLERK OF THE COURT

WARNING: This is a governmental document. Texas Penal Code, Section 37.10, specifies penalties for making false entries or providing false information in this document. VS-165 REV 07/2017

ADDITIONAL CHILDREN AFFECTED BY THIS SUIT FROM SECTION 3 (IF APPLICABLE)

CHILD 4	23a. CHILD CURRENT NAME (FIRST MIDDLE LAST SUFFIX)		
	23b. DATE OF BIRTH (mm/dd/yyyy)	23c. SEX	23d. BIRTHPLACE (CITY, COUNTY AND STATE)
	23e. PRIOR NAME OF CHILD (FIRST MIDDLE LAST SUFFIX) – IF APPLICABLE		
CHILD 5	24a. CHILD CURRENT NAME (FIRST MIDDLE LAST SUFFIX)		
	24b. DATE OF BIRTH (mm/dd/yyyy)	24c. SEX	24d. BIRTHPLACE (CITY, COUNTY AND STATE)
	24e. PRIOR NAME OF CHILD (FIRST MIDDLE LAST SUFFIX) – IF APPLICABLE		
CHILD 6	25a. CHILD CURRENT NAME (FIRST MIDDLE LAST SUFFIX)		
	25b. DATE OF BIRTH (mm/dd/yyyy)	25c. SEX	25d. BIRTHPLACE (CITY, COUNTY AND STATE)
	25e. PRIOR NAME OF CHILD (FIRST MIDDLE LAST SUFFIX) – IF APPLICABLE		

Instructions for Completing the Suit Affecting Parent Child Relationship Form**GENERAL REQUIREMENT:**

All divorces/annulments (with or without children) and all suits affecting the parent-child relationship must be reported through the clerk of the court to the State Vital Statistics Unit (VSU).

Consolidated reporting by petitioners, attorneys, and the courts is designed to make mandatory reporting more efficient, timely, and improve the quality of reporting. However, this reporting system is only as good or timely as you make it; therefore, your attention in completing and filing this report is critical.

Legal basis for this reporting is contained in Health and Safety Code §194.002 and Texas Family Code §§108.001-.002 and 108.004.

For information concerning reporting or questions about this form, contact field services at fieldservices@dshs.texas.gov or by phone at 512-776-3010.

The VSU-165 form must be printed double-sided (one sheet not two).

For information on the court of continuing jurisdiction of a child, contact VSU at (888) 963-7111 ext. 2529. Inquiries should be addressed to VSU, 1100 West 49th Street, Austin, Texas, 78756-3191; inquiries may also be faxed to (512) 776-7164 .

SECTION 1 GENERAL INFORMATION (REQUIRED)

This section must be completed for each report filed.

- 1a – d. Enter the required information to identify the court proceeding.
- 2. Check the type of suit being reported. This determines also which sections of the form must be completed. If more than one type of order applies, check all that apply. Transfers from one jurisdiction to another must be reported in this section (if court number is unknown, specify "unknown").
- 3a – c. Complete the attorney information to assist in questions or follow up. If case was pro se, please enter the information of the person completing this form.

SECTION 2 (IF APPLICABLE) REPORT OF DIVORCE OR ANNULMENT OF MARRIAGE

All divorces/annulments must be reported, even if there were no minor children. All information is required.

- 4-9. Report the Petitioner's information including maiden name (if applicable).
- 10-15. Report the Respondent's information, including maiden name (if applicable).
- 16. Report the number of minor children affected by this divorce; if none, record "0." This number must correspond to the listing of children in Section 3.
- 17-18. Enter the date and place of the marriage being dissolved.

SECTION 3 (IF APPLICABLE) CHILDREN AFFECTED BY THIS SUIT

Every child affected by the suit being reported must be listed, and all items concerning that child must be completed. If more than three children are affected, check the "additional children listed on back of form" box, and continue to list the additional children. If more than 6 children complete section 3 on another form, label it "continuation" and attached the continuation form to the original form.