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# Name and Gender Marker Changes for Trans Individuals in Erie County

Information regarding pro se legal name and gender marker changes for transgender, nonbinary, and gender non-conforming individuals living in Erie County, New York

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# General Information

This guide is intended to help trans, nonbinary, and gender non-conforming individuals ages eighteen and up (18+) through the legal name change process in Erie County, New York.

This guide will be broken up into multiple sections, and will include information regarding: seeking a legal name change pro se (without the help of an attorney), changing your legal name on government issued documents, changing your gender marker on government issued documents, and changing your name and gender marker on other documents.

Use the provided Table of Contents to locate the information relevant to your situation that you are looking for.

If at any point you find yourself stuck, confused, or overwhelmed, or are denied services while attempting to change your name/correct your documents, please contact the Neighborhood Legal Services, Inc. Buffalo office at (716) 847-0650.

More information about Neighborhood Legal Services, Inc. can be found at: <https://nls.org/>

# In The Meantime

Changing your legal name can be a long process. Below are some resources you may be interested in taking advantage of before and during your name change process.

## Restoration of Honor Act

If you served in the U.S. military and received an Other-Than-Honorable Discharge (OTH) or General Under Honorable Conditions Discharge due to:

- Post-Traumatic Stress Disorder (PTSD)
- Traumatic Brain Injury (TBI)
- Military Sexual Trauma (MST)
- Your Sexual Orientation
- Your Gender Identity

You may now apply for potential restoration of New York State Veterans Benefits for you and your family under the New York State Restoration of Honor Act. This will not change your official federally issued character of discharge on your discharge paperwork. More information and applications can be found at:

<https://veterans.ny.gov/sites/default/files/nys-dvs-roh-packet-01jun20.pdf>

Applications can be returned to [inclusion@veterans.ny.gov](mailto:inclusion@veterans.ny.gov) or to:

New York State Division of Veterans' Services  
ATTN: Appellate Unit  
2 Empire State Plaza, Floor 17  
Albany NY 12223

## Citibank Credit Cards

Citibank is now allowing its trans, nonbinary, and gender non-conforming customers to use their preferred (non-legal) names on US Citi-branded consumer credit cards. More information about this can be found at: <https://banking.citi.com/cbol/updatemyname/>



# Legal Name Change Process

## Overview

When changing your legal name, you will need to submit (file) certain documents with the Erie County Supreme Court at the Erie County Clerk's Office. If you do not live in Erie County, you will need to file your documents listed below with the Supreme Court in the county that you live in.

Filing the required documents can be done either in person or through online filing (e-filing). After you have filed the necessary documents, a judge will review your case. The judge will contact you for more information if needed regarding your name change. Occasionally, you will be required to appear in court depending on the circumstances of your case.

If the Judge approves your name change, you will receive a signed Name Change Order from the Judge. After you receive the signed Name Change Order, you will then need to file this with the Erie County Clerk.

After filing the signed Name Change Order with the Erie County Clerk, you will have 60 days to publish a notice of your name change in the local newspaper. The court will instruct you on which newspaper to publish your name change in. The newspaper will require a time-stamped copy of the name change Order for publication. Keep in mind that the newspaper will charge a fee for publication.

After publication, be sure to request an Affidavit of Publication from the newspaper to certify that you have published a notice of your name change. Following publication and receipt of the Affidavit of Publication, you will have 90 days to file the Affidavit of Publication with the Erie County Clerk.

After you have done this, your name change will be complete. You will need the Name Change Order to change any of your documentation, such as your license and passport. You can obtain certified copies of the Name Change Order from the Erie County Clerk after the Affidavit of Publication has been filed. It is generally a good idea to get multiple certified copies, and be sure to keep a certified copy for yourself in your records.

## Form Information

A link to all of the name change forms provided by the New York State Unified Court System are available at: <http://nycourts.gov/courthelp/NameChange/forms.shtml>.

**If you need to keep your name change private for safety reasons, you can request a waiver of publication from the court.** This will require additional steps. Courts have decided that transgender status is enough to prove that a waiver of publication is necessary. If you wish to request a waiver of the publication requirement, please be sure to take the additional steps directed in the “Publication Waiver” section.

Additionally, **if you are 18 years of age or older, you are not in prison, on probation, or on parole, and you do not need to keep your name change private due to safety concerns** (you are not seeking a waiver of publication), **you may use the New York Courts Name Change Petition Program to fill out the necessary forms for a name change.** This will not file the forms for you, but will fill in the forms for you. This program can be found at: <http://nycourts.gov/CourtHelp/DIY/nameChange.shtml>

## Required Documents

The first step in seeking a legal name change is filing the appropriate documents with the court. **Necessary documents to file in order to seek a legal name change in Erie County can be found in Appendix A.** These documents include:

- **Petition for Name Change**
- **Order for Name Change**
- **Request for Judicial Intervention**
- **Application for Index Number**

These documents should be filled out electronically or, if handwritten, printed neatly in black ink.

Additional necessary items and fees for seeking a name change include:

- **Original or certified copy of your birth certificate**
  - If you were born in New York and no birth certificate is available, then a certificate from the Commissioner of the local Board of Health saying that no birth certificate is available will work
  - If you were born outside of the United States, you can provide a certificate or record of birth
- **Court fee of \$210** (this can be waived if you unable to afford the fee with a fee waiver). If you are looking to waive the court fee, you will need to fill out and file:
  - Poor Person Order (Appendix B)

- Affidavit in Support of Application to Proceed as a Poor Person (Appendix B)
- **Fee for each certified copy of your Name Change Order** that you will be requesting (we recommend getting a few certified copies)
- **Publication fee** (this varies by newspaper)
- **Proposed Temporary Order Sealing** (Appendix C) (this is only required if you are requesting a waiver of publication and record sealing)

**The Petition for Name Change and Affidavit in Support of Application to Proceed as a Poor Person (if applicable) both need to be notarized.** This means that these documents must be signed in front of a notary public in order to be certified. **Do not sign or date these documents until you are in front of a notary public.** Many banks, UPS stores, County Clerk's offices, and Courts have notaries that are able to do this for you. Some notaries may charge a fee, but others will notarize your documents free of charge. Be sure to bring your ID with you to the notary.

## Petition Information

A petition is a paper that asks the court to start your name change case. This petition will work as an application for your name change. A blank petition can be found in Appendix A or at <https://www.nycourts.gov/forms/ncpetition.pdf>

The name change petition must include specific information about yourself, such as:

- Your birth name and any previous names you have gone by;
- Your correct chosen name;
- Your address;
- Your birthday and the city you were born in;
- Why you are seeking a name change (this reason must be legitimate and non-fraudulent – this means that you are not changing your name to commit fraud);
- If you were convicted of a crime, information about the crime, and time served. You can attach a copy of the Certificate of Incarceration or Certificate of Disposition to your Petition.
- If you were convicted of bankruptcy, when the judgment was made, and the terms. You can attach a copy of the judgment along with the Petition;
- If there are judgments or liens against you, when the judgment was made, who the judgment is owed to, and the amount of the judgment. A judgement is when a court declares that you owe a debt to someone. A judgement shows up on your credit report. A lien happens when you owe a debt to someone and a legal claim for that amount is put on your income or property until that debt is paid back. If you have judgments or liens against you or your property, you can attach copies;

- If you are involved in a lawsuit, give the names of the people in the lawsuit, the reason for the lawsuit, the Index Number or Docket Number, and what court the lawsuit is in. You can attach copies of the court papers to your Petition;
- If you pay child or spousal support and how much. You can attach a copy of the support order.

You **must sign (with your birth name) and date the petition in front of a notary public.**

If you are seeking a waiver of publication, additional information will need to be included in your petition.

## Name Change Order Information

An order is a command from a judge. An Order Granting Leave to Change Name will allow you to change your documentation to reflect your correct name. It certifies that your name has been changed.

You will want to file this Order when you file your Petition. A blank copy of can be found in Appendix A or at <https://www.nycourts.gov/forms/ncorder.pdf>

## Request for Judicial Intervention Information

Filing a Request for Judicial Intervention (RJI) form assigns a Judge to your case. For a name change, there is no cost to file a RJI form. After filing the RJI form with the County Clerk, you will get a receipt for the RJI.

You will want to file this RJI when you file your Order and Petition. A blank copy can be found at Appendix A or at <http://nycourts.gov/forms/rji/UCS-840-fillable.pdf>.

## Application for Index Number Information

In order to open your name change case, you will need an Index Number. An Index Number is the number assigned to indicate and identify the file in which the court record is kept. The cost of obtaining an Index Number is \$210. Checks should be made payable to the Erie County Clerk.

You will need to fill out an Application for an Index Number found in Appendix A or at <https://www2.erie.gov/clerk/sites/www2.erie.gov.clerk/files/uploads/pdfs/INDEX%20NUMBER%20APPLICATION%20FORM%20-%20FINAL%20fill-in.pdf>.

This cost can be waived by submitting a Fee Waiver Application if you are unable to afford the cost depending on your financial situation. This cost can be waived by filing a fee

waiver (consisting of a Poor Person Order and a Poor Person Application Affidavit) if you are unable to afford the cost depending on your financial situation.

**Once you receive your Index Number, you will want to write this number in the top-right corner of your Name Change Petition and Name Change Order.**

## Fee Waiver Information

A fee waiver waives the \$210 cost associated with opening a case. In order to waive the filing fees, you will need to fill out and file a **Poor Person Order** (Appendix B) and an **Affidavit in Support of Application to Proceed as a Poor Person** (Appendix B) when you file your petition.

**You must sign (with your birth name) and date the Affidavit in Support of Application to Proceed as a Poor Person in front of a notary public.**

In addition to submitting these documents at the Chief Clerk's Office along with your other necessary documents (as is discussed below), you will also need to send a copy of each set of papers to the County Attorney to:

Erie County Attorney  
95 Franklin Street, Room 1634  
Buffalo, New York 14202

The County Attorney will review your papers and tell the Court if they agree with your financial hardship. If the County Attorney agrees with your financial hardship, you will receive a letter from the Judge stating that your fees have been waived. If the Judge waives your fees, you do not have to pay the \$210 filing fee. If the Judge denies your request, you must pay the filing fee of \$210 within 120 days after the date that the Name Change Order is signed.

The Poor Person Order can also be found at:

[https://www.nycourts.gov/LegacyPDFS/courts/8jd/pdfs/helpctr/Poor\\_Person\\_Order.pdf](https://www.nycourts.gov/LegacyPDFS/courts/8jd/pdfs/helpctr/Poor_Person_Order.pdf)

The Affidavit in Support of Application to Proceed as a Poor Person can also be found at:

[https://www.nycourts.gov/LegacyPDFS/courts/8jd/pdfs/helpctr/poor\\_person\\_affidavit.pdf](https://www.nycourts.gov/LegacyPDFS/courts/8jd/pdfs/helpctr/poor_person_affidavit.pdf)

## Publication Waiver Information

In order for the publication requirement to be waived, **you will need to insert additional language into your Petition and file a Proposed Temporary Order Sealing with the court.**

The Proposed Temporary Order Sealing can be found in Appendix C. The court will waive the publication waiver if the court decides that, based on the totality of the circumstances, publication of a change of name would jeopardize your safety. If your publication waiver is granted, your file will also be sealed, meaning that your name change case will not be in the public record.

When requesting a waiver of publication, you will need to include an explanation of why you are afraid to publish a notice of your name change and how publishing a notice of your name change will put you at risk of harm in your petition. You can include any personal experiences of transphobia and specific instances of harassment, violence, or discrimination you have experienced due to your transgender status.

There is no guarantee that the judge will grant your request. However, if you are concerned for your safety, it is a good idea to request a waiver of the publication requirement.

## Where to Go

After you have filled out the necessary forms, as well as gathered the additional necessary items and filing fee, you will need to take these documents to the **Erie County Clerk's Office, Actions & Proceedings Department, at 92 Franklin Street, Buffalo, NY**. Here an index number will be assigned. After the index number is assigned, you will need to go to the **Chief Clerk's Office at 25 Delaware Avenue, Ground Floor**. Here you will need to submit a time-stamped copy of the RJ1 and all of your original completed documents.

If you do not want to (or cannot) file your documents in person, you can file your papers over the internet (e-filing). By e-filing, you will upload your completed documents to the court. That can be done at:

<https://iappscontent.courts.state.ny.us/NYSCEF/live/unrepresented/UnrepresentedHomePage.html>

## Publication Information

When changing your name, you are required to publish a notice of your name change in a local newspaper. You will need to take a time-stamped copy of the Name Change Order to the newspaper listed in the Order. The newspaper will charge a fee for this service.

Generally, a publication of notice for a name change will follow the below format:

Notice is hereby given that an order entered by the \_\_\_\_\_ court, \_\_\_\_ county, on the \_\_\_\_ day of \_\_\_\_, bearing Index Number \_\_\_\_, a copy of which may be examined at the office of the clerk, located at \_\_\_\_, in room number \_\_\_\_, grants me the

right to assume the name of \_\_\_\_\_. The city and state of my address are \_\_\_\_\_; the month and year of my birth are \_\_\_\_\_; place of my birth is \_\_\_\_\_; my present name is \_\_\_\_\_.

**Publication of this notice must happen no more than 60 days after the Name Change Order is signed by the judge.** After publishing the notice with the newspaper, be sure to ask for an Affidavit of Publication from the newspaper to certify that you have published the notice. After you receive the Affidavit of Publication, you will need to go back to the County Clerk's office to file the Affidavit of Publication. **The Affidavit of Publication must be filed with the County Clerk no more than 90 days after the Name Change Order is signed by the judge.**

## Legal Name Change Checklist

Below is a checklist of the necessary steps for seeking a legal name change. Skip any steps that are not applicable to you.

- ☐ Fill out and notarize Petition and fill out Name Change Order, Request for Judicial Intervention, and Application for Index Number
- ☐ Fill out the Proposed Temporary Order Sealing if you are seeking a publication waiver
- ☐ Gather original or certified copy of your birth certificate
- ☐ Gather court fee of \$210 if you are not seeking a fee waiver
- ☐ Fill out Poor Person Order and fill out and notarize Affidavit in Support of Application to Proceed as a Poor Person if you are seeking a fee waiver
- ☐ File the above documents, either through e-filing or at the Erie County Clerk's Office with the Erie County Supreme Court
- ☐ Take time-stamped copy of Name Change Order to newspaper listed in the Order no more than 60 days after the Name Change Order is signed by the judge
- ☐ File Affidavit of Publication with the Erie County Clerk no more than 90 days after the Name Change Order is signed by the judge
- ☐ Request multiple certified copies of the final Name Change Order



# Gender Marker Change

Generally, all that is required to change your gender marker on your documentation is a letter of support from your physician. The exception to this is your New York State birth certificate, which requires a Notarized Affidavit of Gender Error.

Keep in mind that, in order to update your passport, the letter submitted must be from a licensed Doctor of Medicine (M.D.) or Doctor of Osteopathic Medicine (D.O.). Your general practitioner or, if you are receiving hormone replacement therapy, your endocrinologist should be able to provide this documentation for you.

Each specific documentation listed in the “Updating your Documentation” section of the guide will provide in-depth instructions about what is necessary for changing your gender marker on that identification document. It can be helpful to request multiple letters of support from your doctor. Some institutions (like the Social Security Administration) require the letter of support to be addressed to that specific institution. Some institutions require an original copy of the letter and will not accept photocopies.

# Updating Your Documentation

This portion of the guide will include information about how to update various identity documentation after you have received your name change from the court.

## Social Security Card

In order to update your social security card, you will need to do this with the Social Security Administration. You may update your name and/or gender marker either in person or by mail. Many people have their social security cards updated first. There is **no cost** to update your name and/or gender marker on your social security card.

**The following documents are necessary to change your name with the Social Security Administration:**

- **Form SS-5** (On this form, be sure to use your corrected name and corrected gender marker. This is the information that will replace the previous information.)  
<https://www.ssa.gov/forms/ss-5.pdf>
- **Certified copy of Name Change Court Order**
- **Original Birth Certificate**
- **Current (not expired) U.S. driver license, U.S. passport, or state-issued non-driver ID card** - If you do not have one of these documents to prove identity and you cannot get a replacement within 10 days, you can also supply another current photograph identification document that shows your name, identifying information, a picture of yourself, and your age or date of birth.
- **Current social security card**
- **Proof of U.S. Citizenship** (if you are a U.S. citizen) – this can be one of the following:
  - U.S. Birth Certificate
  - U.S. Passport
  - Certificate of Naturalization
  - Certificate of Citizenship
  - Certificate of Report of Birth
  - Consular Report of Birth Abroad
- **Proof of Immigration** (if you are not a U.S. citizen) – this can be one of the following:
  - Form I-551 (Lawful Permanent Resident Card, Machine Readable Immigrant Visa) with your unexpired foreign passport;
  - I-766 (Employment Authorization Document, EAD, work permit); or

- I-94 (Arrival/Departure Record) or admission stamp in the unexpired foreign passport.
- If you're an F-1 or M-1 student, you will also need to provide your I-20 (Certificate of Eligibility for Nonimmigrant Student Status).
- If you're a J-1 or J-2 exchange visitor, you will also need to provide your DS-2019 (Certificate of Eligibility for Exchange Visitor Status).

The documentation must all be originals or certified copies from the issuing agency. The social security office will not accept photocopies, notarized copies of documents, or receipts showing you applied for the document.

**In order to change your gender marker, in addition to the above documents, you will also need one of the following:**

- **Full-validity, 10-year U.S. passport with your corrected gender marker; or**
- **State-issued amended birth certificate showing the new gender; or**
- **An original, signed, and notarized doctor's letter on professional letterhead** stating "upon penalty of perjury":
  - That your doctor has a doctor/patient relationship with you
  - That your doctor is not related to you
  - That you have received "appropriate clinical treatment" for gender transition (You do not need to be on hormone replacement therapy or have any affirming surgeries. Your doctor just needs to state that you have had the "appropriate clinical treatment" for your transition.)
  - Your correct gender

## Driver License, Permit, or Non-Driver ID Card

In order to update your driver license, learner permit, commercial driver license, or non-driver ID card, you will need to go to the DMV. There is a fee of \$12.50 to update your driver license or learner permit and a fee of \$5 to update your non-driver ID card.

**The following documents are necessary to change your name on your Driver license, Permit, or non-driver ID card:**

- A completed **Application for Permit, Driver License, or Non-Driver ID Card (MV-44)** (Be sure to fill out this form with your corrected name and gender marker)  
<https://dmv.ny.gov/forms/mv44.pdf>
- Your **current license, permit, or non-driver ID card**, or at least 6 points of proof of identity and proof of date of birth

- Visit <https://dmv.ny.gov/registration/proofs-identity-and-date-birth-nys-vehicle-registrations-or-title-certificates> to determine what forms of ID are necessary to fulfill the 6 points of proof of identity and date of birth
- Original or certified copy of **Name Change Court Order**

**If you are changing your gender marker, you will also need to supply “proof” of gender change.** According to the DMV website, “This can be in the form of a written statement from a physician, psychologist, psychiatrist or other appropriate professional that is printed on letterhead. The statement must certify that one gender is your main gender and that you identify as male or female. An appropriate professional can include but is not limited to a Life Counselor, a Clinical Social Worker or other professional who is overseeing the change in gender.”

When changing your name and/or gender marker on a driver license, permit, or non-drivers ID at the DMV, you will be required to take a new ID photo.

You can update your voter registration records at the same time you submit a name change with the DMV.

### Updating Vehicle Registration and Title

If you update your driver license, learner permit, or non-driver ID, you must also update your vehicle registration and title. There is no fee to update your registration documents and title certificate with your corrected name.

**The following documents are necessary to change your name on your vehicle registration and title:**

- Your **current title** or other acceptable proof of ownership
- A completed **Vehicle Registration/Title Application (MV-82)**  
<https://dmv.ny.gov/forms/mv82.pdf>
- Your **current license, permit, or non-driver ID**
- Original or certified copy of your **Name Change Court Order**

### Appealing a Denial of Updated Driver License, Permit, or Non-Driver ID Card

If you are denied an updated driver license, permit, or non-driver ID card, you can appeal the denial. This is done by submitting a completed **Administrative Appeal Form (AA-33A)** (<https://dmv.ny.gov/forms/aa33a.pdf>) by mail to:

DMV Appeals Board  
P.O. Box 2935  
Albany, NY 12220-0935

Along with the Administrative Appeal Form, you must send a **\$10 Appeal Fee**. This fee must be paid by check or money order made payable to the “Commissioner of Motor Vehicles.”

The Administrative Appeal Form and \$10 Appeal Fee must be postmarked no more than sixty (60) days after the date of your denial.

## New York State Department of Health

In order to update the name and gender marker on your New York State Birth Certificate, you must submit the following documents to the New York State Department of Health:

- Completed and signed Application for Correction of Certificate of Birth for Gender Designation for an Adult (Form DOH 5305) <https://www.health.ny.gov/forms/doh-5305.pdf>
- Notarized Affidavit of Gender Error for a Person 17 Years of Age or Older (Form DOH 5303) [https://transequality.org/sites/default/files/docs/id/DOH-5303\\_NotarizedGenderDesignation\\_ADULT%5B29002%5D.pdf](https://transequality.org/sites/default/files/docs/id/DOH-5303_NotarizedGenderDesignation_ADULT%5B29002%5D.pdf)
- Certified copy of your current birth certificate
- Original or certified copy of the Name Change Court Order
- Payment of fee by check or money order payable to the New York State Department of Health (There is a fee of \$30 per birth certificate copy)

**Applications and other necessary documents should be submitted by mail to:**

New York State Department of Health  
Director of Vital Records  
Attention: Guy Warner  
Personal and Confidential  
800 North Pearl Street 2nd Floor  
Albany, NY 12204

New York City issues birth certificates separately from the rest of New York State. If you were born in New York City, see the Sylvia Rivera Law Project’s guide to New York City birth certificate gender/name corrections: <https://srlp.org/resources/changeid/#NYCBC>

If you were born outside of New York State, visit the National Center for Transgender Equality’s ID Documents Center (<https://transequality.org/documents>) or call the Department of Health or Bureau of Vital Statistics for the state in which you were born for information about specific state guidelines.

## Passport

In order to update your passport, you will need to submit the following documents to a local passport agency or post office:

- **The completed but unsigned DS-11 Form** <https://eforms.state.gov/Forms/ds11.pdf>
- **Evidence of U.S. citizenship.** This can be:
  - Fully-valid, undamaged U.S. passport (may be expired)
  - U.S. birth certificate that meets the following requirements:
    - Issued by the city, county, or state of birth
    - Lists your full name, date of birth, and place of birth
    - Lists your parent(s)' full names
    - Has the date filed with registrar's office (must be within one year of birth)
    - Has the registrar's signature
    - Has the seal of the issuing authority
  - Consular Report of Birth Abroad or Certification of Birth
  - Certificate of Naturalization
  - Certificate of Citizenship
- **Photocopy of evidence of U.S. citizenship** (front and back, if there is printed information on both sides). Photocopies must be:
  - Legible
  - On white 8.5"x11" standard paper
  - Black and white
  - Single sided
- **Photo ID** that "resembles your current appearance". Acceptable forms of ID are:
  - Valid or expired, undamaged U.S. passport book or passport card
  - In-state, fully valid driver's license or enhanced driver's license with photo
  - Certificate of Naturalization
  - Certificate of Citizenship
  - Government employee ID (city, county, state, or federal)
  - U.S. military or military dependent ID
  - Current (valid) foreign passport
  - Matricula Consular (Mexican Consular ID) - commonly used by a parent of a U.S. citizen child applicant
  - U.S. Permanent Resident Card (Green Card) - commonly used by a parent of a U.S. citizen child applicant
  - Trusted Traveler IDs (including valid Global Entry, FAST, SENTRI, and NEXUS cards)
  - Enhanced Tribal Cards and Native American Tribal Photo IDs

- Other documents: In-state, fully valid learner's permit with photo, In-state, fully valid non-driver ID with photo, and temporary driver's license with photo. Note: you may be asked to present an additional ID when presenting one of these 3 documents.
- If you present an out-of-state ID, you must present an additional ID.
- **Photocopy of photo ID** (front and back, if there is printed information on both sides). Photocopies must be:
  - Legible
  - On white 8.5"x11" standard paper
  - Black and white
  - Single sided
- **A 2x2 inch passport photo that "resemble your current appearance"** (these can be taken at some post offices, the Niagara County Clerk's Office, and pharmacies like Walgreens)
- **Original or Certified Copy of Name Change Court Order**
- **Your social security card**

**If you are updating your gender marker, you will need to provide a signed, original statement from a licensed physician on office letterhead.** This statement must include:

- Physician's full name, address, and telephone number
- Physician's medical license or certificate number
- Issuing state or other jurisdiction of medical license/certificate
- Language stating that:
  - They have treated you, or has reviewed and evaluated your medical history
  - You have had appropriate clinic treatment for transition to male or female, or are in the process of transition to male or female
    - Your physician determines what appropriate clinical treatment is according to acceptable medical practices, standards and guidelines, and certifies that you have had appropriate clinical treatment for transition to either male or female.
    - Surgery is not a requirement to get a U.S. passport
    - A description of specific treatments is not required in the medical certification. The certification is based on your physician's clinical assessment of your treatment.
  - "I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct."

**It costs \$110 for an updated passport book and \$30 for an updated passport card.**

For standard processing method of **10-12 weeks**, there are no additional fees. For an expedited processing method **4-6 weeks**, there is an additional fee of **\$60**.

There is **no cost for standard delivery** of your updated passport book and/or card. For **1-2 day delivery, there is a fee of \$17.13**. Your supporting documents (such as previous passports/birth certificates) will be returned to you via USPS first class mail.

## School Records and Diplomas

In most cases, submitting a copy of a name change order to a school secretary or Registrar is adequate for updating your name in school records. However, you should contact the institution to ask what exact documentation is required. You may also want to ask about how to obtain an updated copy of your high school or college diploma.

## Selective Service

**Information for trans women, transfeminine people, and any trans, nonbinary, or gender non-conforming people who were assigned “male” at birth:**

**U.S. citizens and legal residents aged 18 through 25 who were assigned male at birth are required to register with the Selective Service System.** If you are not registered, you will need to do so. If you are registered, **you will need to notify the Selective Service System of your name change by calling 1-888-655-1825.** If you are over 25, you do not have to register.

Registering for the selective service if you are between 18 and 25 is important, as **applications for federal financial aid for higher education, federal employment, United States citizenship and other government benefits have been made contingent upon Selective Service registration in order to encourage compliance.** Therefore, when applying for government benefits, transgender people can often face particular difficulties in regards to their Selective Service registration status.

According to the Selective Service website, however, "In the event of a resumption of the draft, individuals born male who have changed their gender to female can file a claim for an exemption from military service if they receive an order to report for examination or induction." (<https://www.sss.gov/QA>)

In order to apply, you can submit an electronic application at:  
<https://www.sss.gov/register/>



## Information for trans men, transmasculine people, and any trans, nonbinary, or gender non-conforming people who were assigned “female” at birth:

U.S. citizens and legal residents who were **assigned female at birth are currently exempt from having to register with the Selective Service System** regardless of your transition status. **However, if you are applying for federal financial aid, grants, and loans for higher education, federal employment, U.S. citizenship, or other government benefits as a man/with a male gender marker, you may be asked to prove that you are exempt.** In order to do this, you will need a **Status Information Letter (SIL)** that shows you are exempt. Applying for a SIL is free of charge. **Your actual SIL will not state why you are exempt, will not state that you are trans, and will not out you to those requesting proof of exemption.**

In order to apply for a SIL, you can either electronically fill and print a SIL request form from the Selective Service website (<https://www.sss.gov/Portals/0/PDFs/Status.pdf>) or apply by phone at 1-888-655-1825. This form does include outdated and inappropriate terminology to refer to transgender people.

## Voter Registration

If you change your name with the DMV, you can update your voter registration records at the same time. You can also update your voter registration records online at <https://dmv.ny.gov/more-info/electronic-voter-registration-application>

To you update your name on your New York voter record directly with County Board of Elections, you can submit a **New York State Voter Registration Form** ([https://www.elections.ny.gov/NYSBOE/download/voting/voteform\\_enterable.pdf](https://www.elections.ny.gov/NYSBOE/download/voting/voteform_enterable.pdf)) by mail or in person to the address of the appropriate county board of elections listed on the form.

If you need to check if you are registered to vote, or are looking for information regarding your polling place or early voting, visit: <https://www.nass.org/can-i-vote>

## New York State Common Benefit Identification Card

If you have a New York State Common Benefit Identification Card, you will want to update your information by calling the customer service helpline at 1-888-328-6399.

## New York State Department of Health Benefits

If you receive benefits from the New York State Department of Health (such as Medicaid), you will need to update with them by calling 1-855-355-5777 or by logging into your web login and uploading the appropriate documents.

## Other

You will also want to update your name and/or gender marker (when appropriate/necessary) with other services, employers, and agencies. This can include things such as:

- Employers, Unions, and Professional Organizations
- Bank Accounts and Checks
- Mortgages and Loans
- Credit Cards
- Landlords/Leases
- Insurance
- Educational Programs
- Immigration ID with U.S. Citizenship & Immigration Services
- Department of Corrections & Community Supervision/Parole Office
- Utilities
- Doctors, dentists, therapists, counselors, and other medical professionals
- Will
- Healthcare proxy

The above list is non-exhaustive. In most of these cases, these can be changed with a regular photocopy of your name change order and/or letter of support from your doctor. Contact each of these institutions/companies to see if they require a certified copy of the order, however, to be sure.

Further information about changing any additional documentation can be found at:

<https://srlp.org/resources/changeid/#otheritems>

## Document Update Checklist

Below is a (non-exhaustive) list of documents to update with your new legal name and/or updated gender marker. Skip any documents that are not applicable to you.

- ☐ Social Security Card
- ☐ Driver license, learner permit, commercial driver license, or non-driver ID card
- ☐ Vehicle registration and title
- ☐ Birth Certificate
- ☐ Passport
- ☐ School records and diplomas
- ☐ Selective Service System
- ☐ Voter Registration
- ☐ New York State Common Benefit Identification Card
- ☐ Employers
- ☐ Workers unions
- ☐ Professional Organizations
- ☐ Credit Cards
- ☐ Bank Accounts and Checks
- ☐ Mortgages and Loans
- ☐ Health Insurance
- ☐ Immigration ID with U.S. Citizenship & Immigration Services
- ☐ Department of Corrections & Community Supervision/Parole Office
- ☐ Insurance (health insurance, car insurance, life insurance, homeowners/rental insurance, etc.)
- ☐ Lease/Landlord
- ☐ Property titles, deeds, trusts
- ☐ Homeowners association/management agency
- ☐ Utilities
- ☐ Doctors, dentists, and counselors
- ☐ Healthcare proxy
- ☐ Wills
- ☐ Personal websites and emails

# Additional Resources

Below is a list of additional resources regarding name changes for trans individuals:

- Adult Name Change Procedure for Erie County -  
<https://www.buffalony.gov/DocumentCenter/View/1654/Legal-Name-Change-for-Adults-PDF>
- Name Change Basics for New York State -  
<http://www.nycourts.gov/courthelp/namechange/basics.shtml>
- Poor Person Application Procedure for Erie County -  
[https://www.nycourts.gov/LegacyPDFS/courts/8jd/pdfs/helpctr/poor\\_person\\_app\\_long\\_ERIE\\_010412.pdf](https://www.nycourts.gov/LegacyPDFS/courts/8jd/pdfs/helpctr/poor_person_app_long_ERIE_010412.pdf)
- 8th Judicial District Forms for the Self Represented -  
<http://ww2.nycourts.gov/courts/8jd/chcforms.shtml#Waiver>
- National Center for Transgender Equality's ID Documents Center for New York -  
<https://transequality.org/documents/state/new-york>
- Sylvia Rivera Law Project's ID Change Resource -  
<https://srlp.org/resources/changeid/>

# Appendix A

SUPREME COURT OF THE STATE OF NEW YORK  
COUNTY OF \_\_\_\_\_  
(Name of County where Petitioner resides)

-----  
In the Matter of the Application of

\_\_\_\_\_,  
(Insert your current name)

for leave to assume the name of

PETITION FOR  
ADULT NAME CHANGE

\_\_\_\_\_,  
(Insert new name)

Index No. \_\_\_\_\_

-----  
STATE OF NEW YORK  
COUNTY OF \_\_\_\_\_ ss:  
(County where notarized)

The Petition of \_\_\_\_\_ respectfully shows this court:  
(Insert current name)

1. The petitioner lives at \_\_\_\_\_, in the  
(Street Address)  
\_\_\_\_\_ of \_\_\_\_\_, County of \_\_\_\_\_, and  
(City / Town / Village)  
has lived there for a period of \_\_\_\_\_ years and \_\_\_\_\_ months before  
making this application and accordingly, pursuant to CRL sec. 60, petition is being filed  
in the County of \_\_\_\_\_.  
(Name of County where Petitioner resides)

2. The petitioner \_\_\_\_\_ was born at \_\_\_\_\_  
(Insert current name)  
\_\_\_\_\_ on the \_\_\_\_\_ day of \_\_\_\_\_, and is now \_\_\_\_\_  
(Insert hospital, city, state, county) (Insert your date of birth)  
years old. (Attached is a copy of petitioner's birth certificate)

3. The petitioner proposes to change his/her name to \_\_\_\_\_  
(Insert proposed new name)

4. The petitioner is a natural born citizen of the United States.

5. The petitioner \_\_\_\_\_ and \_\_\_\_\_ been married previously.  
(Is / is not) (has / has not)

6. The petitioner: (check one):

\_\_\_\_\_ has never been convicted of a crime

\_\_\_\_\_ has been convicted of a crime, the details of which are attached in a separate statement, attached to this Petition and made a part of this application.

7. The petitioner has never been adjudicated a bankrupt.

8. There are no judgments or liens of record against your petitioner and petitioner is not a party to any actions pending in any court of this state or of the United States, or of any Governmental subdivision thereof, or elsewhere, whether the court of record or not. There are no bankruptcy or insolvency proceedings, voluntary or involuntary, pending against your petitioner in any court whatsoever or before any officer, person, body or board having jurisdiction thereof, and your petitioner has not, at any time, made any assignments for the benefit of a creditor. (If there have been, submit written details instead of the previous statement)

9. There are no claims, demands, liabilities or obligations of any kind whatsoever on a written instrument or otherwise against your petitioner under the only name by which s/he has been known, which are the name sought herein to be abandoned, and your petitioner has no creditors who may be adversely affected or prejudiced in any way by the proposed name change. (If there have been, submit written details instead of the previous statement)

10. The petitioner \_\_\_\_\_ responsible for child support obligations. (If there are  
(is/ is not)  
child support obligations, details are attached in a separate statement)

11. The petitioner \_\_\_\_\_ responsible for spousal support obligations. (If there  
(is/ is not)  
are spousal support obligations, details are attached in a separate statement)

12. The grounds of this application to change the petitioner's name are:

---

---

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---

\_\_\_\_\_ 13. No previous application has been made for the relief sought herein.

**WHEREFORE**, petitioner respectfully prays for an order permitting the petitioner,

\_\_\_\_\_, to assume the name \_\_\_\_\_  
(Insert current name) (Insert proposed new name)

in place of that of \_\_\_\_\_.  
(Insert current name)

STATE OF NEW YORK  
COUNTY OF \_\_\_\_\_ ss:  
(County where notarized)

INDIVIDUAL VERIFICATION

THIS IS TO CERTIFY that I, \_\_\_\_\_ being  
(Insert your name)  
duly sworn deposes and says: your deponent is the Petitioner in the within action; your deponent has read the foregoing Petition and knows the contents thereof. The same is true to deponent's own knowledge, except as to the matters therein stated to be on information and belief, and as to those matters deponent believes it to be true.

\_\_\_\_\_  
(Sign your name in the presence of a Notary Public)

\_\_\_\_\_  
(Print your name)

Sworn to before me this

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
Notary Public



At a term of the Supreme Court of the  
State of New York, held in and for the  
County of \_\_\_\_\_,  
at \_\_\_\_\_, NY on  
\_\_\_\_\_, 20\_\_\_\_\_.

Present: Hon.. \_\_\_\_\_  
Justice of the Supreme Court

\_\_\_\_\_  
In the Matter of the Application of

**ORDER GRANTING LEAVE  
TO CHANGE NAME**

\_\_\_\_\_  
For Leave to Assume the Name of

Index #: \_\_\_\_\_

\_\_\_\_\_  
Upon reading and filing of the petition of \_\_\_\_\_  
verified the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, praying for leave to change  
\_\_\_\_\_'s name to \_\_\_\_\_,  
and the Court being satisfied by said petition that it is true and that there is no  
reasonable objection to the change of name proposed.

**NOW** on motion of \_\_\_\_\_, Petitioner, it is hereby

**ORDERED** that the Petitioner \_\_\_\_\_ having  
been born on \_\_\_\_\_ in \_\_\_\_\_,  
(with birth certificate number \_\_\_\_\_, issued by the Department of  
Health of \_\_\_\_\_) (with \_\_\_\_\_ as proof of birth,  
since no birth certificate is available), is hereby authorized to assume the name of  
\_\_\_\_\_ in place of the present name, upon full  
compliance with this Order and the filing of the affidavit of publication hereinafter  
specified, and it is further,

**ORDERED** that this Order be entered and the papers on which it was granted be filed prior to the publication hereinafter directed in the office of the County Clerk of \_\_\_\_\_ County, and that notice of this Order be published within sixty (60) days after the making of this Order in the \_\_\_\_\_, a newspaper published in the County of \_\_\_\_\_, at least once, in substantially the following form as prescribed in Section 63 of the Civil Rights Law of the State of New York,

Notice is hereby given that an order entered by the Supreme Court, \_\_\_\_\_ County, on the \_\_\_\_\_ day of \_\_\_\_\_, bearing Index Number \_\_\_\_\_, a copy of which may be examined at the office of the clerk, located at \_\_\_\_\_, grants me the right to assume the name of \_\_\_\_\_. The city and state of my present address are \_\_\_\_\_; the month and year of my birth are \_\_\_\_\_; the place of my birth is \_\_\_\_\_; my present name is \_\_\_\_\_.

and an affidavit of such publication shall be filed in the \_\_\_\_\_ County Clerk's Office within ninety (90) days after the making of this Order; and it is further

**ORDERED** that upon full compliance with the above provisions of this Order, the Petitioner shall be known by the name of \_\_\_\_\_ which \_\_\_\_\_ is authorized to assume and by no other name.

ENTER:

\_\_\_\_\_



RELATED CASES				
List any related actions. For Matrimonial cases, list any related criminal or Family Court cases. If none, leave blank. If additional space is required, complete and attach the <b>RJI ADDENDUM (UCS-840A)</b> .				
Case Title	Index/Case Number	Court	Judge (if assigned)	Relationship to instant case

  

PARTIES				
For parties without an attorney, check the "Un-Rep" box and enter the party's address, phone number and email in the space provided. If additional space is required, complete and attach the <b>RJI ADDENDUM (UCS-840A)</b> .				
Un-Rep	Parties List parties in same order as listed in the caption and indicate roles (e.g., plaintiff, defendant, 3 <sup>rd</sup> party plaintiff, etc.)	Attorneys and Unrepresented Litigants For represented parties, provide attorney's name, firm name, address, phone and email. For unrepresented parties, provide party's address, phone and email.	Issue Joined For each defendant, indicate if issue has been joined.	Insurance Carriers For each defendant, indicate insurance carrier, if applicable.
<input type="checkbox"/>	Name: Role(s):		<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="radio"/> YES <input type="radio"/> NO	
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<input type="checkbox"/>	Name: Role(s):		<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="radio"/> YES <input type="radio"/> NO	
<input type="checkbox"/>	Name: Role(s):		<input type="radio"/> YES <input type="radio"/> NO	

I AFFIRM UNDER THE PENALTY OF PERJURY THAT, UPON INFORMATION AND BELIEF, THERE ARE NO OTHER RELATED ACTIONS OR PROCEEDINGS, EXCEPT AS NOTED ABOVE, NOR HAS A REQUEST FOR JUDICIAL INTERVENTION BEEN PREVIOUSLY FILED IN THIS ACTION OR PROCEEDING.

Dated: \_\_\_\_\_

Signature

Print Name

Attorney Registration Number

Erie County Clerk  
Buffalo, New York

APPLICATION for INDEX NUMBER  
Pursuant to CPLR §8018

APPLICANT MUST PRINT or TYPE ALL THREE SECTIONS

Index Number

☐ THIRD PARTY ACTION

**TITLE of ACTION or PROCEEDING**

SUPREME \_\_\_\_\_ COURT, ERIE COUNTY

Date: \_\_\_\_\_

Plaintiff or Petitioner

V

Defendant or Respondent

**TYPE OF ACTION**

<input type="checkbox"/> ARTICLE 78	<input type="checkbox"/> HABEAS CORPUS	<input type="checkbox"/> PARTITION
<input type="checkbox"/> CONDEMNATION	<input type="checkbox"/> MENTAL HYGIENE	<input type="checkbox"/> SMALL CLAIMS APPEAL
<input type="checkbox"/> CONSERVATOR	<input type="checkbox"/> MORTGAGE FORECLOSURE	<input type="checkbox"/> TAX CERTIORARI
<input type="checkbox"/> CONTRACT	<input type="checkbox"/> NAME CHANGE	<input type="checkbox"/> TORT
<input type="checkbox"/> FORECLOSURE	<input type="checkbox"/> OTHER (Specify: _____)	

\_\_\_\_\_  
Name and Address of Attorney for Plaintiff or Petitioner

\_\_\_\_\_  
Name and Address of Attorney for Defendant or Respondent

-----  
ERIE COUNTY CLERK  
**TITLE of ACTION or PROCEEDING**

Endorse this INDEX NUMBER  
on ALL PAPERS pertaining  
to this Action.

Plaintiff or Petitioner

V

Defendant or Respondent

Do not write in this space

RETAIN THIS COPY for YOUR RECORDS

# Appendix B

At IAS Part \_\_\_\_ of the Supreme Court  
of the State of New York, held in and  
for the County of \_\_\_\_\_ at the  
Courthouse, \_\_\_\_\_,  
\_\_\_\_\_, New York  
the \_\_\_\_ day of \_\_\_\_\_, 20\_\_.

PRESENT: HON. \_\_\_\_\_  
Justice of the Supreme Court

-----  
In the Matter of the Application of

\_\_\_\_\_,  
(Insert your name) Plaintiff(s)/Petitioner(s)

For Permission to Prosecute as a Poor  
Person a Matter against

ORDER

Index No. \_\_\_\_\_

\_\_\_\_\_,  
Defendant(s)/Respondent(s)  
-----

Upon the annexed affidavit of \_\_\_\_\_,  
(Insert your name)

sworn to \_\_\_\_\_ 20\_\_, the \_\_\_\_\_ and the certificate  
(Insert date affidavit sworn to before notary) (Insert: verified complaint / petition / motion)

of \_\_\_\_\_ ESQ., dated \_\_\_\_\_.  
(Insert name of attorney & date if submitted. If not, leave blank.)

And it being alleged that said \_\_\_\_\_ has a good  
(Insert: plaintiff(s) / petitioner(s) / defendant(s) / respondent(s))

cause of action or claim or defense based upon \_\_\_\_\_  
(Briefly describe the underlying facts of your cause of action or claim)

\_\_\_\_\_  
\_\_\_\_\_.

And it being alleged that he/she is unable to pay the costs, fees and expenses to  
prosecute/defend this action, and that there is no other person beneficially interested in  
the action thereof,

Now on motion of \_\_\_\_\_,  
(Insert your name) (Insert: plaintiff(s) / petitioner(s) /  
defendant(s) / respondent(s))

it is hereby

ORDERED that:

A. The motion is denied on the grounds that the \_\_\_\_\_  
failed to make (Insert: plaintiff(s) / petitioner(s) / defendant(s) / respondent(s))

1 \_\_\_\_ A sufficient showing of a meritorious cause of action/defense  
and/or

2 \_\_\_\_ A sufficient showing of indigence

Papers may be resubmitted upon payment of fees, in a timely manner

**-OR-**

B. \_\_\_\_ The motion is granted and the \_\_\_\_\_  
(Insert: plaintiff(s) / petitioner(s) / defendant(s) / respondent(s)) (Insert your name)  
\_\_\_\_\_ permitted to proceed herein as a poor person(s), and it is further  
(is / are)

ORDERED that the County Clerk shall make no charge in connection with the  
prosecution/defense of this matter/proceeding, and it is further

ORDERED that any recovery by judgment or settlement in favor of the

\_\_\_\_\_ shall be paid to the Clerk of the Court to await distribution  
(Insert: plaintiff(s) / petitioner(s) / defendant(s) / respondent(s))

pursuant to court order.

\_\_\_\_\_  
Hon.  
JUSTICE OF SUPREME COURT



SUPREME COURT OF THE STATE OF NEW YORK  
COUNTY OF \_\_\_\_\_

-----  
In the Matter of the Application of

\_\_\_\_\_,  
(Insert your name) Plaintiff/Petitioner

For Permission to Prosecute as a Poor  
Person a Matter against

AFFIDAVIT IN SUPPORT  
APPLICATION TO PROCEED  
AS A POOR PERSON

Index No. \_\_\_\_\_

\_\_\_\_\_,  
Defendant(s)/Respondent(s)

-----  
STATE OF NEW YORK  
COUNTY OF \_\_\_\_\_ ss:  
(County where notarized)

\_\_\_\_\_, being duly sworn, says:  
(Insert your name)

1. I am the \_\_\_\_\_ . I reside at  
(Insert one - plaintiff / petitioner / defendant / respondent)

\_\_\_\_\_ in the County of \_\_\_\_\_  
(Insert street address, city/town/village, state and zip code) (Insert name of county)

and State of New York.

2. I am about to \_\_\_\_\_ a \_\_\_\_\_ for:  
(Insert commence or defend) (Insert lawsuit or special proceeding)

\_\_\_\_\_  
(Briefly describe the nature of the relief sought)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

This lawsuit is based upon: \_\_\_\_\_  
(Describe briefly the factual basis for the lawsuit/special proceeding about to be **commenced**/defended)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

3. My sole source of income is : \_\_\_\_\_  
(State in detail how you earn (receive) all of your income)

---

---

---

I earn \$ \_\_\_\_\_ per \_\_\_\_\_ : \_\_\_\_\_

---

---

(Submit proof of the amount, for example: employer's pay stub, W-2 stub, Social Services ID)

4. I support myself and \_\_\_\_\_ others in my  
(Insert actual number of people)

household.

5. My property and their values are as follows: \_\_\_\_\_  
(Describe in detail)

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6. I make this application pursuant to Section 1101 of the Civil Practice Law and Rules upon the ground that I am unable to pay costs, fees and expenses necessary to pursue/defend the case and am unable to obtain the funds to do so, and unless an order is entered relieving me from the obligation to pay, I will be unable to prosecute/defend the case.

7. No other person is beneficially interested in the recovery sought herein.

8. No previous application for the same or similar relief has been made by me in this case except: \_\_\_\_\_

---

---

(If any prior request has been made, provide a description of where, when and by whom the request was made, the result, and if the application was unsuccessful, why you believe you are entitled to apply again.)

WHEREFORE, I respectfully ask for an order permitting me to prosecute /defend this action/special proceeding as a poor person.

\_\_\_\_\_  
(Sign your name in the presence of a Notary Public)

\_\_\_\_\_  
(Print your name)

Sworn to before me this

\_\_\_\_ day \_\_\_\_\_ of, 20\_\_\_\_

\_\_\_\_\_  
Notary Public

# Appendix C

**SUPREME COURT OF THE STATE OF NEW YORK  
COUNTY OF \_\_\_\_\_**

(Name of county where you reside)

**IN THE MATTER OF**

\_\_\_\_\_  
(Your current legal name)

**Petitioner,**

**FOR LEAVE TO CHANGE PETITIONER'S NAME TO**

\_\_\_\_\_  
(Your new name)

**TEMPORARY ORDER  
SEALING COURT RECORDS  
PURSUANT TO CIVIL RIGHTS  
LAW §64-A(2)**

**INDEX NO.**

A Petition for a change of name seeking relief under Civil Rights Law §64-a having been filed in this Court requesting that the court records be immediately sealed and safeguarded from disclosure,

NOW, it is hereby

ORDERED, that the Petitioner's current name, proposed new name, residential and business addresses, telephone numbers, and any other information contained in any pleadings or papers submitted to the court shall be sealed while the matter is pending.

Entered:

\_\_\_\_\_  
Hon. \_\_\_\_\_, JSC