The Family Court of the State of Delaware

In and For [ ]  New Castle County [ ]  Kent County [ ]  Sussex County

# ANSWER TO PETITION FOR MINOR NAME CHANGE

|  |  |
| --- | --- |
| **File Number** | **Petition Number** |
|  |  |

*Petitioner vs Respondent 1 Respondent 2*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  Name |  |  Name |  |  Name |
|        |  |        |  |        |
|  Street Address |  |  Street Address |  |  Street Address |
|         |  |         |  |        |
|  P.O. Box / Apt Number |  |  P.O. Box / Apt Number |  |  P.O. Box / Apt Number |
|        |  |        |  |        |
|  City/State/Zip Code |  |  City/State/Zip Code |  |  City/State/Zip Code |
|        |  |        |  |        |
|  D.O.B.  |  |  D.O.B. |  |  D.O.B |
|        |  |          |  |        |
|  Relationship to Minor |  |  Relationship to Minor |  |  Relationship to Minor |
|  [ ]  Parent | [ ]  Legal Guardian |  |  [ ]  Parent | [ ]  Legal Guardian |  |  [ ]  Parent [ ]  Legal Guardian |
|  Attorney Name |  |  Attorney Name |  |  Attorney Name |
|        |  |        |  |        |
|  Interpreter Needed [ ]  Yes [ ]  No |  |  Interpreter Needed [ ]  Yes [ ]  No |  |  Interpreter Needed [ ]  Yes [ ]  No |
|  Language       |  |  Language       |  |  Language       |

**\*If you agree with the request made in the Petition for Minor Name Change, you can file with the Court the attached Form 493 - Affidavit of Parental Consent to Petition for Minor Name Change. You need not also file the Answer.**

The Respondent hereby answers the numbered questions in the Petition for Minor Name Change as follows (use additional pages for comments if necessary):

|  |  |
| --- | --- |
| 1 | The Petition correctly stated whether I am listed on the birth certificate.  |
|  [ ]  Admit | [ ]  Deny | Comments:  |       |
| 2 | The Petition correctly stated whether I filed a Voluntary Acknowledgement of Paternity.  |
|  [ ]  Admit | [ ]  Deny | Comments:  |       |
| 3 | The Petition correctly stated whether I had been established as a parent of the child by a Court. |
|  [ ]  Admit | [ ]  Deny | Comments:  |       |
| 4 | The Petition correctly stated whether my parental rights of the child had been terminated. |
|  [ ]  Admit | [ ]  Deny | Comments:  |       |
| 5 | The Petition correctly describes my contact with the child.  |
|  [ ]  Admit | [ ]  Deny | Comments:  |       |
| 6 | The Petition correctly describes my financial support of the child. |
|  [ ]  Admit | [ ]  Deny | Comments:  |       |
| 7 | The Petition correctly describes my position on the requested name change.  |
|  [ ]  Admit | [ ]  Deny | Comments:  |       |

|  |  |  |
| --- | --- | --- |
| SWORN TO AND SUBSCRIBED Before me this date, |       | . |
|       |  |       |  |       |  |
| Affiant (Print Name) |  | Affiant (Signature) |  | Notary Public/Clerk of Court |  |

(Complete the following sworn statement AFTER mailing or delivering a copy to the Petitioner. Then file this paper with the Family Court.)

A copy of this Answer, and or the Affidavit of Parental Consent was sent or given to Petitioner by [ ]  U.S. Mail to the above address

with postage on \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_; or [ ]  personal delivery on \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ to (location or address) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

State of Delaware, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_     \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

County of [ ]  New Castle [ ]  Kent [ ]  Sussex signature of person who mailed or delivered the document

SIGNED AND SWORN TO (OR AFFIRMED)

BEFORE ME ON \_\_\_\_\_\_/\_\_\_\_\_\_/\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ notary public / Clerk of Court