



Changing Your Name in South Carolina

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What You Should Bring to the Family Court

- ___ Order and Certificate of Name Change and Amendment of Birth Record
- ___ Arrest and Conviction Affidavit **(NOTARIZED)**
- ___ Child Support and Alimony Affidavit **(NOTARIZED)**
- ___ Dep. of Social Services (DSS) Background Check **(NOTARIZED)**
- ___ S.C. Department of Corrections (SCDC) Background Check
- ___ S.C. Law Enforcement Division (SLED) Record Check for Name Change
- ___ Name Change Petition **(not required in all counties)**
- ___ \$150.00 Filing Fee **(preferred cash, maybe debit or cashier's check)**
- ___ Original or Certified Copy of Birth Certificate

Additional Things You Will Need

- ___ \$10.00 Fingerprint Card Fee **(not required by all police stations)**
- ___ \$25.00 SLED Record Check Fee **(must be cashier's check)**
- ___ \$8.00 DSS Background Check Fee **(must be cashier's check)**
- ___ \$20.00 in notary fees **(for 4 docs, cost will vary depending on notary)**
- ___ appropriate amount of stamps and envelopes **(recommendation is 6)**
 - 1 to mail DSS forms and 1 included for return service
 - 1 to mail request for SCDC Check and 1 included for return service
 - 1 to mail SLED form and fingerprints, 1 included for return service

Order and Certificate of Name Change and Amendment of Birth Record

Where to Find It:

This form should be supplied to you by your Family Court Clerk. It can be filled out in the office so it's not necessary to have it ahead of time. If needed, you could try to have to faxed or mailed to you beforehand by contacting your county's Family Court office.

Information Needed to Complete:

old name, new name, date of birth, reason for name change, birthplace (county and state if in USA), full names of both parents

Additional Tips:

For your reason for name change, I've been advised that it is best to go with something along the lines of "Petitioner does not use birth name and would prefer to have legal name to reflect name that is more commonly used".

* Since this form is specific to each county, I have not included a blank copy of it in this document. However, I'd be happy to help you get in touch with your local court's office to obtain a copy that would work for you. If you have any questions, feel free to email me.

Arrest and Conviction Affidavit

Where to Find It:

I've included a blank copy on the next page of this document.

Information Needed to Complete:

residence county name, old name (as well as any other name you have gone by), new name

Additional Tips:

DO NOT SIGN UNTIL MEETING WITH A NOTARY. You are required to provide a picture ID to the notary before signing any notarized document in order to prove the validity of the signature. Once that is finished, the notary will sign, date, and stamp the document themselves.

Also, it is only necessary to fill out the blanks in EITHER case 1 or case 2 on this form. If you have been arrested or convicted, write the name you were using at the time in the blanks in case 1. If you have never been arrested or convicted, write all your previous names as well as your new name in the blanks in case 2.

A great place to get something notarized is your local UPS store. No appointment needed and it should cost around \$5 per form. More information, including a Store Locator, here: <https://www.theupsstore.com/store-services/notary-services>

* A blank copy of this form is located on the next page. If you have any questions, feel free to email me.

State of South Carolina)
)
County of _____)

AFFIDAVIT

Personally appeared before me the undersigned, who being duly sworn, deposes and says:

1. I am making the request for a background check and screening statement from the State Law Enforcement Division. I have never been arrested or convicted of a crime under a name other than the name(s) _____,
_____.

2. Below are the names I have used; however, I have never been arrested:
_____, _____.

3. I understand that a person who knowingly and willfully falsifies this affidavit is subject to criminal punishment as provided by law.

[Signature of Petitioner]

SWORN to and subscribed before me

this ____ day of _____, 20__.

Notary Public for South Carolina
My Commission Expires: _____

Child Support and Alimony Affidavit

Where to Find It:

I've included a blank copy on the next page of this document.

Information Needed to Complete:

residence county name, old name (as well as any other name you have gone by), new name, date of birth, social security number

Additional Tips:

Leave the right side line 2 (____ JUDICIAL CIRCUIT) and line 3 (C.A. NO.: _____) blank. These are for the clerk's use.

You are going to need a witness to co-sign this one in front of the notary. The notary themselves cannot act as a witness. You have two options, (1) bring a friend or family member with you or (2) ask if another employee can serve as your witness. I recommend option (1).

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A great place to get something notarized is your local UPS store. No appointment needed and it should cost around \$5 per form. More information, including a Store Locator, here: <https://www.theupsstore.com/store-services/notary-services>

* A blank copy of this form is located on the next page. If you have any questions, feel free to email me.

STATE OF SOUTH CAROLINA
COUNTY OF _____

In re: _____,
Plaintiff,

) IN THE FAMILY COURT
) _____ JUDICIAL CIRCUIT
)
) C.A. NO.: _____
)
) AFFIDAVIT
)
)

The undersigned, being duly sworn, states the following:

I, _____, am not obligated for any outstanding child support or alimony payments ordered through the court in the name of _____ or _____. My date of birth is _____ and my Social Security number is _____.

Affiant

SWORN TO AND SUBSCRIBED
BEFORE ME THIS _____ DAY OF
_____ 2012

Witness

Notary Public for South Carolina

My commission expires: _____

Department of Social Services (DSS) Background Check

Where to Find It:

I've included a blank copy on the next page of this document. Additionally, this form is known as DSS Form 3072 and should be relatively easy to track down online. Make sure you have the most recent version (as of the time I am writing this, the most recent version is AUG 2013).

Information Needed to Complete:

current mailing address, current residential address, previous address (within past seven years), current telephone number, old name, new name, date of birth, sex (as it listed under Social Security), race, maiden name (if applicable), place of birth, social security number

Additional Tips:

DO NOT SIGN UNTIL MEETING WITH A NOTARY. You are required to provide a picture ID to the notary before signing any notarized document in order to prove the validity of the signature. Once that is finished, the notary will sign, date, and stamp the document themselves.

A great place to get something notarized is your local UPS store. No appointment needed and it should cost around \$5 per form. More information, including a Store Locator, here: <https://www.theupsstore.com/store-services/notary-services>

Under Section 1. Purpose for Request, check box B and write "name change" as the purpose.

Send this form, along with a cashier's check for \$8.00 and a stamped, self-addressed envelope, to:

South Carolina Dept. of Social Services
ATTN: Cashier
1535 Confederate Avenue
P.O. Box 1520
Columbia, SC 29202-1520

* A blank copy of this form is located on the next page. If you have any questions, feel free to email me.

South Carolina Department of Social Services
CONSENT TO RELEASE INFORMATION

With my signature below, I consent for the South Carolina Department of Social Services to conduct a one-time search of the records indicated below to determine whether they contain information that I was the perpetrator of harm to a child and to release information found to the individual/organization named below.

I understand that the information provided may prove to be unfavorable to me. I agree to hold the South Carolina Department of Social Services and its staff harmless from liability associated with release of information requested on this form. If it appears to me that the information has not been updated or is otherwise inaccurate, I agree to notify the Department immediately.

SECTION I. Purpose for Request

A. I am requesting a search of the Central Registry of Child Abuse and Neglect and the Department's database of records of Child Abuse and Neglect cases in connection with:

- becoming or remaining a foster parent or potential adoptive parent; or
- becoming or remaining an employee of or a member of the state or a local foster care review board; or
- becoming an employee or volunteer for the South Carolina Guardian ad Litem Program or Richland County CASA.

B. I am requesting a search **ONLY** of the Central Registry of Child Abuse and Neglect for a purpose of _____.

SECTION II. Mail Results To:

ATTN: _____

TEL. NO: _____

SECTION III. Central Registry Check Fees: Please appropriate box and include payment. Check or Money Order (NO CASH).

- | | |
|---|--|
| <input type="checkbox"/> Non-Profit Entities.....\$8.00 | <input type="checkbox"/> Name Changes.....\$8.00 |
| <input type="checkbox"/> For-Profit Entities..... \$25.00 | <input type="checkbox"/> Other (Individuals, etc.).....\$8.00 |
| <input type="checkbox"/> State Agencies.....\$8.00 | <input type="checkbox"/> Private Adoption Investigations.....\$25.00 |
| <input type="checkbox"/> Schools.....\$8.00 | |

SECTION IV. Please print legibly or type the following: First, Middle and Last Name (NO INITIALS)

Name: _____ DOB: _____ Sex: _____ Race: _____
Maiden/Aliases: _____ Name Change: _____
Place of Birth: _____ SSN: (See instructions) _____
Current Address: _____ Previous Address: (See instructions) _____

SECTION V. Your signature MUST be witnessed or notarized. Please mail appropriate payment and form for processing to: South Carolina Dept. of Social Services, ATTN: Cashier, 1535 Confederate Avenue, P.O. Box 1520, Columbia, SC 29202-1520.

_____ Signature of Applicant	_____ Date
_____ Signature of Notary or Witness	_____ Date

SECTION VI. RESULTS: THIS SECTION IS TO BE COMPLETED ONLY BY AUTHORIZED DSS EMPLOYEES OF THE DEPARTMENT.

- The name is not included as a perpetrator on the Central Registry of Child Abuse and Neglect.
- The request has been received. Additional research will be required to respond to the request. Thirty to sixty days may be required. Please call _____ if you have any questions.
- The name is included as a perpetrator on the Central Registry of Child Abuse and Neglect.
- The name is included as a perpetrator in the Department's database of records of child abuse and neglect cases. See attached correspondence.

Authorized DSS Employee

Date

S.C. Department of Corrections (SCDC) Background Check

Where to Find It:

You will have to request this background check in writing directly from the SCDC - there is no form to fill out. When I contacted them, they gave me a list of information to include in a letter that I would need to mail to their office along with a self-addressed and stamped envelope. Once they received that and performed the check, they sent a filled out document back to me.

I HIGHLY recommend you call to confirm that their requirements and mailing address have not changed. Their website is not very forthcoming with this information so it's hard for me to keep my information up-to-date.

Telephone Number: (803) 896 - 8531

Information Needed to Complete:

current mailing address, old name, new name, sex (as it is listed under Social Security), race, date of birth, social security number, reason for request ("name change"), phone number, place of birth

Additional Tips:

Don't forget to include a stamped envelope made out to your address along with your request in your mailing to:

South Carolina Department of Corrections
ATTN: Inmate Records Office
4444 Broad River Road
Columbia, SC 29221-1787
P.O. Box 21787

* I've included a blank replication of the letter I sent to the SCDC. It includes all information that they required as of December 2015. It would be a good idea to call them and confirm that their requirements have not changed before mailing your own letter. If you have any questions, feel free to email me.

S.C. Department of Corrections, Inmate Records Office

To Whom It May Concern,

My name is _____ and I am currently in the process of legally changing my name. I would like to request an inmate records search for this purpose. My information is as follows:

Birth Name: _____

Name Change To: _____

Sex: _____

Date of Birth: _____

Place of Birth: _____

Race: _____

Social Security Number: _____

I have enclosed a self-addressed envelope for your convenience. If you need any more information, please do not hesitate to call me at _____. Thank you for your time.

Respectfully,

S.C. Law Enforcement Division (SLED) Background Check

Where to Find It:

Like the previous background check, this one is a bit of a two-step process. First, you will have to call SLED and request a “Name Change Packet” to be sent to you in the mail. They will send you the Records Check Form and a blank Fingerprint Card (more on that in the next section).

Telephone Number: (803) 896 - 1443

You will fill out both the form and the card and mail them, along with another stamped, self-addressed envelope, and a cashier’s check for \$25.00.

Eventually, SLED will mail you back the completed Records Check Form and this is the one you will submit to the court.

Information Needed to Complete:

current mailing address, old name, new name, maiden name (if applicable), date of birth, social security number

Additional Tips:

Don’t forget to include a stamped envelope made out to your address along with your request in your mailing to:

South Carolina Law Enforcement Division
ATTN: Records
P.O. Box 21398
Columbia, SC 29221

SLED may send you an additional affidavit to sign and have notarized. If so, make sure to complete this and include it in your mailing. Remember not to sign the affidavit until you are with the notary.

Include the completed Fingerprint Card (see next section) with your mailing.

* SLED will send you all the paperwork you need for this step so I have not included it. If you have any questions, feel free to email me.

S.C. Law Enforcement Division (SLED) Fingerprint Card

Where to Find It:

This is the second component of the “Name Change Packet” sent to you by SLED. Please see the previous section for information related to obtaining this card.

Information Needed to Complete:

current residential address, old name, employer and address (if applicable), maiden name or alias (if applicable), social security number, height, race, sex (as listed with Social Security), weight, hair color, eye color, date of birth, place of birth, reason for fingerprint check (“name change”)

Additional Tips:

The best place to have your fingerprints taken is your local police station. The whole process should not take more than half an hour and the cost usually ranges from \$0 to \$10.

* SLED will send you all the paperwork you need for this step so I have not included it. If you have any questions, feel free to email me.

Name Change Petition

Where to Find It:

I've included a blank copy on the next page of this document.

Information Needed to Complete:

birth name, residence county name, age, place of birth, date of birth, new name

Additional Tips:

Several of the people I have worked with in the past have needed this petition to file their request but interestingly enough I did not need it when I filed for my own name change. The clerk I spoke with said that many counties were starting to move away from this policy. Still, I recommend filling it out as a safety precaution as it's a fairly straightforward document.

* A blank copy of this form is located on the next page. If you have any questions, feel free to email me.

STATE OF SOUTH CAROLINA)
)
COUNTY OF _____)
)
In Re: _____)
)
Plaintiff)
)

IN THE FAMILY COURT FOR THE
_____ JUDICIAL CIRCUIT

PETITION FOR NAME CHANGE

Case NO.: _____

The Petitioner would respectfully show unto the Court:

1. Petitioner is a resident of _____ County, South Carolina.
2. Petitioner is _____ years of age.
3. Petitioner was born in _____ County, _____ on _____.
4. The name on Petitioner's birth certificate is _____; a copy of Petitioner's birth certificate is attached hereto.
5. Petitioner does not use birth name and would prefer to have legal name to reflect name that is more commonly used.
6. Petitioner wishes to change their name to _____.
7. Petitioner has attached hereto the results of a criminal background check and a screening statement from SLED indicating that they are not listed on the Division's sex offender registry.
8. Petitioner has attached hereto a screening statement from the SCDSS indicating that they are listed on the Department's Central Registry of Child Abuse and Neglect.
9. Petitioner has attached hereto an affidavit stating that they are not under any court order to pay child support or alimony.
10. Petitioner does not seek to change their name for any fraudulent, illegal, or improper purpose.

WHEREFORE, the Petitioner asks:

- A. For an order from this Court legally changing Petitioner's name to _____;

- B. For an order from this Court entitling Petitioner to the issuance of an amended birth certificate reflecting the name of _____;
- C. For such other and further relief as this Court deems just and equitable.

Respectfully Submitted

Date: _____

County: _____, South Carolina