

Name:
Address:
Telephone No.:

PRO SE

IN THE SUPERIOR COURT
OF THE
COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS

| | | |
|-------------------------------|---|------------------------------------|
| IN THE MATTER OF THE PETITION |) | |
| FOR THE CHANGE OF NAME OF: |) | FCD-CN CIVIL ACTION NO. ____--____ |
| |) | |
| |) | |
| A Minor Child |) | CONSENT BY NATURAL |
| |) | MOTHER/FATHER |
| By: |) | |
| |) | |
| _____ |) | |
| Petitioner (s) |) | |

I, (_____), being first duly sworn and depose certify that I am the natural (_____) of (_____), born on (_____), at (_____). I have knowledge of the Petition for Change of Name filed by (_____). I give my full consent to said petition and request that said petition be granted by this honorable Court.

This consent constitutes my voluntary appearance in this proceeding and I ask to waive any further service on the notice of hearing.

IN WITNESS WHEREOF, I affix my signature below on this _____ day of _____, 20__.

NOTARY PUBLIC

On this _____ day of _____, 20____, before me, the undersigned Notary Public in and for the Commonwealth of the Northern Mariana Islands, Saipan, _____ appeared to me personally known to be the person who executed the forgoing Consent of Change of Name and who acknowledged execution of the same.

NOTARY PUBLIC