

A graphic of the Arkansas state flag, which is a diamond shape with a white center and a blue border containing white stars. The word "ARKANSAS" is written in blue capital letters across the white center. There are three blue stars below the text and one blue star above it. The entire graphic is set against a background of a red, wavy fabric.

ARKANSAS

Name & Gender Change Guide

Updated January 2020



Name & Gender Change Guide

Transgender people need accurate and consistent IDs to rent a home, apply to school, travel the country and the globe, open bank accounts, participate in the job market, make certain purchases, and the list goes on. However, the name and gender change process is complicated and sometimes financially inaccessible. Many states have intrusive requirements—such as proof of surgery or court orders—that have created unnecessary barriers for transgender people to update their IDs. As a result, gender incongruent identification exposes people to a range of negative outcomes, from denial of employment, housing, and public benefits to harassment and physical violence.

To address access to legal name and gender change services in the state of Arkansas, the Arkansas Transgender Equity Collaborative (ArTEC) has maintained this comprehensive Arkansas Name & Gender Change Guide to assist individuals seeking identification documents congruent with their gender identity. In 2014, a study of the Arkansas transgender community provided a snapshot of the disparities of incongruent documents. The findings showed us that most people have not completed a legal name change and more do not have a birth certificate, driver's license, or passport reflecting their accurate gender identity.

ArTEC created this Name & Gender Change Guide to address these disparities and meet several goals:

- Increase access to legal education specific to the name and gender change process throughout Arkansas, and decrease the dependency and limitations of community word of mouth.
- Furnish a guide that is up-to-date and comprehensive in guidelines and tools which have been reviewed and researched by attorneys to make the process clearer, accessible and more user friendly.
- Provide a resource to enable the legal community and social justice advocates to serve the transgender and non-binary community either through educational workshops, legal clinics or direct one-on-one service.
- Serve as a starting point in better understanding and streamlining the name and gender change process in Arkansas as well as a working document for future updates, informed by best practices and feedback from the legal and transgender communities.

ArTEC would like to thank all members of the Arkansas transgender/gender non-binary and intersex community who helped in the development of this guide through their participation and feedback. This legal guide revision would not be possible without attorneys Michael Lauro and Stephen Cogger of QLaw Arkansas, Brandon Román, and Callan Smith of Squire Patton Boggs LLC, and Arli Christian, formerly of NCTE.

ArTEC continuously strives to be as accessible to the community as much as possible. We would like to hear back from you about your experiences using this guide and what you found while navigating the name or gender change process in Arkansas for future updates of this guide and to keep advocates updated.

Contact us at ArTEC.trans@gmail.com.

Sincerely,

Krystopher Stephens
ArTEC Executive Director

Andrea Zekis
ArTEC Board President & Co-Founder

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A Project of:



Prepared by:



Changing Your Name

Under Arkansas law, the Circuit Courts have the power to grant a person’s request to change their name. To change your name, you only need to demonstrate that you have a “good reason.” This section is designed to walk you through the process of successfully obtaining a Court Order for Name Change.

Step 1: Prepare Documents

You will need to complete three forms:

1. Cover Sheet

- You will need to fill in the following information:
 - County or District Only (for counties with two county seats);
 - Filing Date;
 - Type of Case: (OM) Civil – Other
 - Plaintiff (i.e., Your Name);
 - Driver’s License/State ID Number;
 - Address (including City, State ZIP);
 - Phone Number;
 - Email Address;
 - Check “Yes” for “Self-represented”;
 - Date of Birth
 - Indicate Whether You Need an Interpreter; and
 - Check “Original” for “Manner of Filing”
- Note: For an editable version of the Cover Sheet, please visit this [link](#).
- Note: If you have questions about how to fill out the Cover Sheet, the Circuit Clerk’s office is a great resource.

2. Petition for Name Change

- If you are requesting a name change only, you can list the reason you are requesting a name change as “*common usage*” or “*this is my preferred name*” as stating you are transgender is unnecessary and may result in a denial of your request, harassment, or requests for additional documentation.
- If you are requesting a name change at the same time as a request for a court order to update your gender marker on your Birth Certificate (See the *Updating Your Birth Certificate* section of this guide for more information on this process.), you may wish to list the reason you are requesting a name change as “sex has been changed by surgical procedure.”

3. Order for Name Change

Copies of these forms can be found on pages 20-22 of the Appendix or accessible via this link www.arlegalservices.org/namechange.

4. Disposition Sheet

- Certain courts may also require a Disposition Sheet. It is best to speak with the Clerk to see whether one is required. If so, you will need to fill in the following information:
 - Case ID: (“In the Matter of [Your Name]”);
 - Check Trial Type “(N) Non-Trial”;
 - Indicate Whether You Need an Interpreter; and
 - Check “Yes” that You Are Self-Represented and Fill In Your Name

Changing Your Name

Step 2: Fee or Fee Waiver

The fee to change your name is presently \$165.00 (some counties may charge more).

If you do not have the ability to pay the \$165.00 fee to change your name, you may prepare a fee waiver and request that the Court waive the fee. Generally, a court will base your ability to pay on what you own and how much money you make.

To request a fee waiver, you will need to complete three forms:

1. Petition for Leave to Proceed *In Forma Pauperis*

- The person seeking a fee waiver should fill in their current legal name as petitioner.
- You will need to sign the Petition.

2. Affidavit in Support of Request to Proceed *In Forma Pauperis*

- You will need to sign the Affidavit, which you must have notarized.
 - Most banks have a notary that can do this for you for free.
 - The Circuit Clerk's office may offer free notary services as well (call ahead to check).

3. Order Granting Leave to Proceed *In Forma Pauperis*

Copies of these forms can be found on pages 24-30 of the Appendix. For more information about the fee, please contact your local Circuit Court Clerk's Office with any questions. A list of all 23 Arkansas Circuit Courts and their pertinent contact information is accessible via this [link](#).

Step 3: Go to Circuit Court Clerk's Office

- Once you have prepared and carefully proofread the applicable forms listed above, you will need to take the original forms and three copies of the Petition and Affidavit, along with the applicable filing fee or granted fee waiver to the Circuit Court Clerk's Office in the county in which you live.
 - Circuit Courts in Arkansas accept cash or checks and money orders made payable to "[County Name] County Circuit Court Clerk." Some counties may accept debit or credit cards for an added transaction fee. It is best to call the Circuit Court Clerk's office to check the acceptable methods of payment.
 - There are 23 Circuit Courts in Arkansas. Please use this [map](#) to locate your Circuit Court and this [list](#) to identify the corresponding Clerk's Office.
- If you are filing for a fee waiver, you must first file – and the Judge must grant – your fee waiver (Petition for Leave to Proceed *In Forma Pauperis*) before you will be able to proceed without paying the filing fee.
 - For example, In Columbia County, where the circuit clerk is in one city and the judges are in another city, you will take all of your documents to the clerk's office; they assist you by opening a case with a pending case number and assign your case to a judge; then they give you a file-marked copy of the documents, and the name and contact information for your assigned judge. You are then responsible for contacting the Trial Court Assistant (i.e. your case coordinator) at the judge's office and coordinating with them the steps to have your fee waiver reviewed by the judge. After the judge makes a decision about your fee waiver (if they sign the order, your fee is waived; if they return it unsigned, you will have to pay the fee), they will mail the signed fee waiver order back to the clerk, who enters the order into the system. Once the fee is waived or paid, your pending case number becomes official. At that point, the Trial Court Assistant can help you coordinate a hearing--if the judge requires one--before granting your name change.
 - However, in Pulaski County, the Circuit Clerk and the judges are in the same city and building. The clerk has copies of the fee waiver documents and will assist you in filling them out (they also provide notary services free of charge). The clerk will then take your fee waiver and name change documents and stamp them as received (you will receive a copy of the documents). Your documents will not be file-marked until either a judge signs the fee waiver order or the filing fee is paid. The clerk will coordinate with the judge's office regarding your fee waiver. It could take up to two weeks before you hear anything. You will be notified by mail. When you are notified, you can contact the clerk's office or judge's office to confirm the next steps.

Changing Your Name

Step 4: Next Steps

In some Circuits, you may be able complete the name change process in one day. In other Circuits, you may need to wait for an available judge, or you may be required to attend a hearing to decide the issue. The Clerk will be able to explain that particular Circuit Court's process.

- If a hearing is required, the Clerk should issue a Notice of Hearing. If you do not receive a Notice of Hearing, ask the Clerk to issue one.
 - When you receive the Notice of Hearing, ask the Clerk which Judge has been assigned your case.
- Take the Notice of Hearing to the office of the Judge who has been assigned to your case and speak with the Case Coordinator to set a date and time for your hearing.
- After the Case Coordinator fills in the date and time, take the Notice of Hearing back to the Clerk's office.
 - The Clerk will file the Notice of Hearing.
- On the date and time listed on your Notice of Hearing, return to the Circuit Court indicated on your Notice of Hearing.
 - When you arrive at the Circuit Court, you will generally wait in the assigned courtroom until the bailiff calls your case
- The Judge will then proceed with the hearing and will likely ask you questions related to you seeking a name change.
 - It is important that you are respectful and truthfully answer the Judge's questions.
 - In particular, it is possible that the Judge may ask why you why you are seeking to change your name. As with the forms, an appropriate response would be "*[New Name] is my preferred name.*"
 - If you feel uncomfortable attending the hearing and representing yourself before the Judge, you may wish to seek counsel from an attorney.
- Once the Judge has approved an Order for Name Change, you will take the original Order and copies of the Order to the Clerk's Office to file them.
- We recommend getting several certified copies (generally \$5.00 per copy) of the Order for Name Change, as you will need them to continue the process of updating documents.
- Upon receiving your Order for Name Change, use the Order to update your legal name in all relevant places, including with your employer, at your bank, at your school, and anywhere else you have an active record and/or want your correct name to be used.

Updating Your Legal Name and Gender Marker in Your Social Security Records

This section is designed to walk you through the process of successfully updating your name and gender marker in your Social Security Records. Note that your Social Security Card only lists your name and Social Security Number – not your gender. However, the Social Security Administration maintains information in its computer records on everyone who has a Social Security Number, including name, gender, and date of birth, so this section also describes how to update the gender listed in your Social Security Records.

Step 1: Prepare Documents

Updating Your Legal Name with the Social Security Administration

To update your legal name in your Social Security Records (including on your Social Security Card), you will need to complete and submit the following documents:

- 1. Application for Social Security Card** (available online via this [link](#), at your local Social Security Administration office) that includes your changed name;
- 2. Certified copy of the Court Order for Name Change;**
- 3. An unexpired identification document**, such as driver's license, state-issued identity card, or U.S. Passport (it is acceptable if your document includes your former name); and
- 4. Proof of U.S. citizenship or lawful immigration status**, such as a U.S. Passport, birth certificate, or immigration documentation.

Your name should update in the Social Security Administration's system within 24 hours, and you should receive your new Social Security Card via mail. For additional information, please see the Social Security Administration's guide via this [link](#).

Updating Your Gender Marker with the Social Security Administration

Although your gender is not listed on your Social Security Card, other government agencies look to your Social Security Records to verify your gender. Thus, changing your gender marker with the Social Security Administration will help you avoid any unnecessary confusion. You may update your gender marker in your Social Security Records at the same time or separately from when you update your legal name with the Social Security Administration.

To update your gender marker in your Social Security Records, you will need to complete and submit the following documents (which must be either originals or copies certified by the issuing agency – photocopies or notarized copies of documents will be rejected):

- 1. Application for Social Security Card** (available online via this [link](#), at your local Social Security Administration office) that includes your changed name;
- 2. An unexpired identification document**, such as driver's license, state-issued identity card, or U.S. Passport (it is acceptable if your document includes your former name); and
- 3. Proof of U.S. citizenship or lawful immigration status**, such as a U.S. Passport, birth certificate or immigration documentation;
- 4. At least one of the following documents as evidence of your gender change:**
 - U.S. Passport (showing the correct gender)
 - State-issued Birth Certificate (showing the correct gender)
 - Court Order (recognizing the correct gender)
 - Signed Letter from a Physician (confirming that you have had "appropriate clinical treatment" for gender transition¹)
 - The letter must be from a licensed physician with whom you have a patient relationship and who is familiar with your transition-related treatment.
 - This may be any physician who is familiar with your treatment, including a primary care physician or a specialist.
 - All certifications must be on the physician's office letterhead and include the physician's license or certificate number.
 - The letter need only state that you have had the clinical treatment determined by your health care providers to be appropriate; no further detail is necessary or recommended. An example letter can be found on page 31 of the Appendix.

Updating Your Legal Name and Gender Marker in Your Social Security Records

Step 2: Submit Documents

- You may mail-in your completed application to your local Social Security Administration Office or apply in person. Note that any documents you mail-in will be returned.
- To locate your nearest Social Security Administration Office, please visit this [link](#).
- There is no fee to update your Social Security Records or receive a new Social Security Card.
- Your new Social Security Card will be mailed to the address you provided and your Social Security Records will be updated in accordance with the information provided in your application and supported by acceptable documents.

¹Please note that “appropriate clinical treatment” is whatever treatment is best for you as confirmed by your doctor, and surgery is not required

Updating Your Legal Name & Gender Marker on Your Driver's License and State Identification Card

This section is designed to walk you through the process of successfully updating your name and gender marker on your driver's license or state identification card from the Arkansas Office of Motor Vehicle.

Step 1: Prepare Documents & Fee

Updating Your Legal Name

To update your legal name on your driver's license, you will need to complete and submit the following documents:

1. A copy of your Court Order for Name Change.

2. Proof of Legal Presence, Identity, Residency, and Social Security Number.

- Proof of **Legal Presence** (at least one item from the list below):
 - U.S. Passport
 - U.S. Birth Certificate
 - Must be an original or certified copy, have a raised seal, and be issued by the Bureau of Vital Statistics or State Board of Health.
 - Certain U.S. Citizenship and Immigration Services Documents
 - Certificate of Naturalization
 - Certificate of Citizenship
 - Resident Alien Card
- Proof of **Identity** (at least one item from the list below)
 - Current Driver's License or State Identification Card
 - Work or School Photo ID
 - Concealed Handgun or Pilot's License
 - Vehicle Title and Registration
 - Tax Document received from the Internal Revenue Services (IRS)
 - Court Order (must have a seal; Name Change Order suffices)
 - Military ID
 - Photo Military-Dependent ID
 - Armed Forces Discharge Papers
 - Bureau of Indian Affairs or Indian Treaty Card (a Tribal card is not sufficient)
 - Health Insurance Card
 - Includes: private insurance, Medicare, Medicaid, and AR Kids cards (for individuals up to age 19)
- Two Proofs of **Residency**
 - Paycheck stub or earning statement with employer's name & address (issued within the last 6 months)
 - Gas, water, electric, telephone (cell or landline) or cable/internet bill (issued within the last 6 months)
 - Account statement from a bank, financial institution, or brokerage house (includes savings, checking, money market, and brokerage account statements issued within the last 6 months)
 - Current valid homeowners, renters, or motor vehicle insurance policy (dated within 1 year)
 - Valid Arkansas hunting or fishing license
 - Valid Arkansas Concealed Handgun Carry License
 - Personal Property Tax receipt or invoice
 - Current State or Federal Tax Return
 - Certified School Transcript or record identifying you by name and address (for the current school year)
 - College enrollment documentation or a certificate of eligibility for exchange visitor J1 status with a current Arkansas address

Updating Your Legal Name & Gender Marker on Your Driver's License and State Identification Card

- Proof of **Social Security Number**
 - Social Security Card (name appearing on Social Security Card must be the same as on the Driver's License or State Identification; if different, must also have a Court Order for Name Change)
 - W-2 form with your name and full Social Security Number
 - Form 1099 with your name and full Social Security Number
 - Pay-stub with applicant's name and full Social Security Number

3. The fee for a duplicate license is \$10.00.

Updating your Regular Non-Commercial Driver's REAL ID License

Updating Your Legal Name

To locate all revenue offices, visit this [link](#)

To update your legal name on your driver's license, you will need to complete and submit the following documents:

Items to provide:

1. Documents for Legal Presence: Birth Certificate or U.S. Passport
2. Documents for Identity: Regular Driver's License (maybe U.S. Passport)
3. Documents for Residency: Two (2) of the following documents that show your name and physical address:
 - Paycheck, stub or earning statement with your employer's name and address issued within last 6 months
 - A utility bill for water, gas, electricity or land-line telephone service issued within the last 6 months. This includes cable and Internet services.
 - Mobile phone bills issued within the last 6 months.
 - An account statement from a bank/financial institution or brokerage house issued within the last 6 months. This Includes savings, checking, money market and brokerage accounts.
4. Social Security Number
5. Certified Copy of Court Order: Name Change
6. Optional Form: Driver's License Gender Designation Form
7. Cost: \$10.00 for a replacement license with a name change.

Notes:

"Arkansas is taking part in the federal nationwide initiative to improve the security of state-issued driver's licenses and identification cards, which will help fight terrorism and reduce identity fraud. On October 1, 2020, anyone who boards a domestic flight or enters a federal building will either need an Arkansas REAL ID driver's license (DL) or Identification Card (ID), or will need to provide a regular identification and additional accepted forms of identification." (<https://appengine.egov.com/apps/ar/DFA/RealID>)

Additional information can be obtained from the U.S. Department of Homeland Security's REAL ID Frequently Asked Questions for the Public (<https://www.dhs.gov/real-id-public-faqs>) and resources and documents related to the implementation of the REAL ID Act (<https://www.dhs.gov/secure-driverslicense-documentation>)

The Arkansas Department of Finance and Administration offers a web resource that provides a short quiz to help you identify the documents you need to get a REAL ID. You answer a few brief questions below and print your results when complete. To use this resource, visit <https://appengine.egov.com/apps/ar/DFA/RealID>, scroll to the section called "What do I need to get a REAL ID?" and click the "Start" button.

Updating Your Legal Name & Gender Marker on Your Driver's License and State Identification Card

You have two options when applying for or renewing a driver's license or identification card. You may obtain only one of the following:

- Arkansas REAL ID DL or ID: This new card will be compliant with the Federal "REAL ID Act of 2005," and will provide enhanced security from fraud and identity theft. The new card will cost the same as a regular DL or ID card. The new card will also contain a gold star shown on the upper right corner.
- Regular DL or ID cards: These cards which are not compliant with the Federal "REAL ID Act of 2005." The non-compliant cards will be marked, "Not for Federal Identification." State and federal law will only allow you to have either a REAL ID DL or ID or a regular DL or ID. You may not have both. If you have a current, valid DL, you may convert to a REAL ID DL for a \$10 duplicate card charge. Converting a regular ID card to a REAL ID ID card is \$5.

There is no difference in price for a REAL ID or regular license. A new 8-year REAL ID DL costs \$40. If you are within one year of the expiration date of a regular driver's license, you may renew and convert to the REAL ID 8-year DL. The \$40 cost may be prorated so that the expiration date on your card is your birthday.

If you plan to obtain a REAL ID driver's license, then think about ordering a U.S. Passport after changing your name and gender at Social Security. The U.S. Passport can be used to prove legal presence and identity. You may also use your birth certificate but if your name has not been updated on it, then you'll need to provide a linking document, such as your name change court order. The quiz mentioned above should guide you through the process to identify which documents you need to satisfy the REAL ID requirements.

Please see the attachments documents for proof of legal presence and identity for additional information on documents that can be used to satisfy these requirements.

Updating Your Gender Marker

The Arkansas Office of Driver Services has an internal policy that a person's gender marker should be updated on a driver's license or state identification card upon request of the individual, and no additional documentation needs to be shown. This policy is not published, but evidence of the policy from two separate communications with the Department of Finance and Administration states that no documentation is required to change one's gender on their driver's license or state identification care. *The communications can be found on pages 32-33 of the Appendix.* However, it is important to be aware that some people encounter problems when trying to update the gender marker.

To request an updated gender marker on your driver's license or state identification card, submit the Driver's License Gender Designation Form. Along with the Driver's License Gender Designation Form, you should also have handy a copy of the Office's gender marker change policy. *The Driver's License Gender Designation Form can be found on page 34 of the Appendix.*

If you encounter an issue using the *Driver's License Gender Designation Form* with the Office of Motor Vehicle, you can also try to use one (or more) of the following documents that show your updated gender marker:

- A valid U.S. Passport, government-issued driver's license or identification document, or Birth Certificate displaying the requested gender
- A Court Order that indicates you have had appropriate clinical treatment for gender transition
- A letter from your physician confirming that you have had appropriate clinical treatment for gender transition

The fee for a duplicate license is \$10.00.

Step 2: Deliver Documents

1. **To update the name and/or gender marker on your Arkansas Driver's License or State Identification Card,** bring the above documents to your local Office of Motor Vehicle, which can be located [here](#).
2. **To locate REAL ID revenue offices, visit this [link](#).**
3. **To locate all revenue offices, visit this [link](#).**

Updating Your Legal Name & Gender Marker on Your Passport

This section is designed to walk you through the process of successfully updating your name and gender marker on your Passport. If you are only updating your **name** and have a valid existing passport, you need to **renew** your passport. If you are updating your **gender** marker, even if you have a current passport, you have to fill out a **new** passport application.

Updating Your Legal Name on an Existing Valid Passport

When you already have a valid Passport, you may submit a Passport Renewal Application to change your legal name on the passport by mail. You will need to complete and submit:

- 1. A Passport Renewal Application** (Form DS-82)
(A copy of the Passport Renewal instructions and links to the correct documents is available via this [link](#). Follow all written instructions as indicated in the application.)
- 2. Your most recent Passport** (book or card)
- 3. A recent color photograph 2x2 inches in size** (See instructions to the application for further specific information and guidelines for your photo. It is important that your photo comply with these requirements, or your application may be rejected.)
- 4. Order for Name Change** (certified copy showing a seal and officiate/judge signature)
- 5. Fee** (See the Department of State fee schedule for costs, available via this [link](#))

Updating Your Legal Name and Gender Marker on an Existing Passport OR Getting a Passport for the First Time

If you are applying for a gender marker change, submitting a passport application for the first time, or applying for a passport when your old passport is expired, you must apply **in person**. To locate your local Passport Acceptance Facility, please visit this [link](#). You will need to complete and submit:

- 1. Application for U.S. Passport** (Form DS-11). Instructions are available at this [link](#), and a copy of the application is available at this [link](#).
- 2. Proof of U.S. Citizenship** (such as a previous U.S. Passport, certified birth certificate, Certificate of Naturalization, or Report of Birth Abroad)
- 3. Proof of Identity** that contains your signature and photograph that is "a good likeness to you" (such as a previous passport, a driver's license, a certificate of naturalization, military identification, a government employee identification card, etc.)
- 4. A recent color photograph 2x2 inches in size.** (See instructions to the application for further specific information and guidelines for your photo. It is important that your photo comply with these requirements, or your application may be rejected.)
- 5. Order for Name Change** (certified copy showing a seal and officiate/judge signature)
- 6. A letter from your Physician confirming your gender transition** (see the letter requirements below)
- 7. Fee.** See the Department of State fee schedule for costs, available via this [link](#)

Updating Your Legal Name & Gender Marker on Your Passport

Requirements for Physician's Letter Used to Update Your Gender Marker on an Existing Valid Passport

In accordance with State Department policy, a person can obtain a Passport reflecting his or her current gender by submitting a certification from a physician confirming that he or she has had "appropriate clinical treatment" for gender transition. This policy replaces the State Department's old policy, which required documentation of surgical procedures to change your birth sex. Keep in mind that the State Department will require this certification when either a previous Passport or any other personal documentation presented by an applicant reflects a different gender. The State Department will not accept Court Orders for Gender Change or any other proof of gender other than for this letter.

You must submit a signed letter from a licensed physician confirming that you have had "appropriate clinical treatment" for gender transition. The letter must include:

- Physician's full name (note the physician must be either a Medical Doctor or a Doctor of Osteopathy/Osteopathic Medicine)
- Medical license or certificate number
- Issuing state or other jurisdiction of medical license/certificate
- Address and telephone number of the physician
- Language stating that he or she is your attending physician and that he or she has a doctor/patient relationship with you
- Language stating you have had "appropriate clinical treatment" for gender transition to the new gender (male or female)
- Language stating "I declare under penalty of perjury under the laws of the United States that the forgoing is true and correct"

A sample letter can be found on page 35 of the Appendix. You should use the exact language of the sample letter in the Appendix.

Limited Validity Two-Year Passports vs. Full Validity Ten-Year Passports

The State Department still has an outdated policy that distinguishes between a transition that is "in process" and one that is "complete." This distinction was originally intended for applicants who had recently begun a gender transition and needed documentation to travel abroad, before the requirement for undergoing a surgical procedure was removed. The language we recommend above and in our sample letter indicates to the Department of State that the transition is "complete." However, if you submit a letter that indicates your transition is "in process" you will be issued a limited validity two-year Passport. A limited validity two-year Passport can be extended to a full validity ten-year Passport at no additional cost by submitting Application for U.S. Passport (Form DS-5504), along with the necessary documentation indicated in the form, within two-years of the issue date of your limited validity two-year Passport. A copy of the Application for U.S. Passport is available via this link. You may mail-in Form DS-5504 and accompanying documentation to the National Passport Processing Center or drop-off your completed application and required documentation to your local State Department Office. Note that any documents you mail-in will be returned if not damaged.

- **By Mail:**

For Routine Service:

National Passport Processing Center
P.O. Box 90107
Philadelphia, PA 19190-0107

For Expedited Service (Additional Fee):

National Passport Processing Center
P.O. Box 90907
Philadelphia, PA 19190-0107

- **In Person:**

To locate your local Passport Acceptance Facility, please visit this [link](#).

Updating Your Legal Name & Gender Marker on Your Birth Certificate

The Arkansas Department of Health has the power to grant a person's request to update their name and gender marker on their Birth Certificate. Notably, to change your gender marker on your birth certificate, Arkansas law requires that the person seeking to change their gender marker present "a certified copy of an order of a court of competent jurisdiction indicating that the sex of an individual born in this state has been changed by surgical procedure and that the individual's name has been changed." This section is designed to walk you through the process of successfully updating your name and gender marker on your Birth Certificate.

Step 1: Prepare Documents & Fee

- To update your legal name on your Birth Certificate, you will need two documents:
 1. Certified Copy of Order for Name Change
 - Once a Circuit Court Judge has issued an Order for Name Change, you may obtain certified copies of the Order from the Circuit Court Clerk's Office for a fee of up to \$5.00 per copy.
 2. Copy of Original Birth Certificate
 - Similarly, to update your gender marker on your Birth Certificate, you will need:
 1. A Certified Copy of Order for Gender Change indicating that your birth sex has been changed by surgical procedure.
 - Once a Circuit Court Judge has issued an Order for Gender Change, you may obtain certified copies of the Order from the Circuit Court Clerk's Office for a fee of up to \$5.00 per copy.
 2. Copy of Original Birth Certificate
- Note 1:** The Vital Records Department *may* also request a copy of your doctor affidavit as additional documentation. To accommodate for this possibility, it is best to take a copy with you.
- Note 2:** In practice, we have found that if an individual has a name they like, they may change their gender marker on their birth certificate without also changing their name.
- The fee for updating your Birth Certificate is \$15.00. Requests for a copy of an amended Birth Certificate cost an additional \$12.00.
 - The Arkansas Department of Health accepts cash or checks and money orders made payable to "Arkansas Department of Health," and all major credit cards (American Express, Discover, Mastercard, or Visa).
 - If you plan to request your amended Birth Certificate via mail, please do not send cash.

Step 2: Deliver Documents

- **By Mail:**

Please send the above documents, along with the required fee to the following mailing address:

Arkansas Department of Health
4815 West Markham Street, Slot 44
Little Rock, Arkansas 72205

We recommend sending a self-addressed, stamped envelope with your request for an amended Birth Certificate.
- **In Person:**
 - If you plan to request your amended birth certificate in person, please go to the address listed above. Proceed to the Vital Records Department, which is on the bottom floor, and present your documents.
 - The process should take about 30 minutes in total. Someone in the Vital Records Department will retype your birth certificate. You should receive an amended Birth Certificate before you leave the building.

Note that email is not a valid option.

For additional information, please visit this [link](#).

Getting a Court Order for Gender Change

Under Arkansas law, the Circuit Courts also have the power to grant a person's request to change their gender marker. To obtain such an order, you will likely need to provide the Court with an affidavit from your physician confirming that you have had surgical procedures to change your birth sex. This section is designed to walk you through the process of successfully obtaining a Court Order for Gender Change.

Note that if you also plan to seek an Order for Name Change, you may wish to do so at the same time as seeking an Order for Gender Change to consolidate the fees. Note too, the process for updating your gender marker on various forms of identification differs depending on the type of identification and a Court Order for Gender Change is not always required (but is usually helpful).

Step 1: Prepare Documents

You will need to complete three forms:

1. Cover Sheet

- Follow the instructions listed for obtaining a Name Change
- Under "Type of Case" select: (OM) Civil - Other.

2. Petition for Gender Change

3. Order for Gender Change

Step 2: Fee or Fee Waiver

The fee to change your gender marker is presently \$165.00 (some counties may charge more).

If you do not have the ability to pay the \$165.00 fee to change your gender marker, you may prepare a fee waiver and request that the Court waive the fee. Generally, a court will base your ability to pay on what you own and how much money you make.

To request a fee waiver, you will need to complete three forms:

1. Petition for Leave to Proceed *In Forma Pauperis*

- The person seeking a fee waiver should fill in their current legal name as petitioner.
- You will need to sign the Petition.

2. Affidavit in Support of Request to Proceed *In Forma Pauperis*

- You will need to sign the Affidavit, which you must have notarized.
 - Most banks have a notary that can do this for you for free.

3. Order Granting Leave to Proceed *In Forma Pauperis*

Copies of these forms can be found on pages 24-30 of the Appendix. For more information about the fee, please contact your local Circuit Court Clerk's Office with any questions. A list of all 23 Arkansas Circuit Courts and their pertinent contact information is accessible via this [link](#).

Getting a Court Order for Gender Change

Step 3: Go to Circuit Court Clerk's Office

- Once you have prepared and carefully proofread the applicable forms listed above, you will need to take the original forms and three copies of the Petition and Affidavit, along with the \$165.00 filing fee or granted fee waiver to the Circuit Court Clerk's Office in the county in which you live.
 - Circuit Courts in Arkansas accept cash or checks and money orders made payable to “[County Name] County Circuit Court Clerk.” Some Circuit Courts may accept credit or debit cards for an additional transaction fee.
 - There are 23 Circuit Courts in Arkansas. Please use this [map](#) to locate your Circuit Court, and this [link](#) to identify the corresponding Clerk's Office.
- If you are filing for a fee waiver, you must first file – and the Judge must grant – your fee waiver (Petition for Leave to Proceed In Forma Pauperis) before you will be able to proceed without paying the filing fee.

Step 4: Next Steps

In some Circuits you may be able complete the gender change process in one day. In other Circuits, you may need to wait for an available judge, or you may be required to attend a hearing to decide the issue. The Clerk will be able to explain that particular Circuit Court's process.

- A Circuit Court Clerk will be able to explain their particular Circuit Court's process for seeking an Order for Gender Change and should issue a Notice of Hearing. If you do not receive a Notice of Hearing, ask the Clerk to issue one.
- When you receive the Notice of Hearing, ask the Clerk which Judge has been assigned your case.
- Take the Notice of Hearing to the office of the Judge who has been assigned to your case and speak with the Case Coordinator to set a date and time for your hearing.
- After the Case Coordinator fills in the date and time, take the Notice of Hearing back to the Clerk's office.
 - The Clerk will file the Notice of Hearing.
- On the date and time listed on your Notice of Hearing, return to the Circuit Court indicated on your Notice of Hearing.
 - When you arrive at the Circuit Court, you will generally wait in the assigned courtroom until the bailiff calls your case.
- The Judge will then proceed with the hearing and will likely ask you questions related to you seeking a gender change.
 - It is important that you are respectful and truthfully answer the Judge's questions.
 - In particular, the Judge will likely ask why you are seeking to change your gender. As with the forms, an appropriate response would be *“My birth sex has been changed by surgical procedure.”*
 - If you feel uncomfortable attending the hearing and representing yourself before the Judge, you may wish to seek counsel from an attorney.
- Once the Judge has approved an Order for Gender Change, you will take the original Order and copies of the Order to the Clerk's Office to file them.
- We recommend getting several certified copies of the Order for Gender Change, as you will need them to continue the process of updating documents.

Name & Gender Changes for Minors

If the person seeking a name change or gender change (or both) is under 18, a parent or legal guardian must file the appropriate cover sheets, petitions, and orders, stating the reasons for the proposed change and that the change is not for fraudulent purposes.

The process requires written and notarized consent from **both** parents. If you do not know where one parent lives, you must make every effort to let them know that you are filing for a name or gender change, and document those efforts to present to the court.

In determining whether to grant the request, the judge will take into consideration the best interests of the child. This may include (1) the child's preference (given more weight the older the child is); (2) the effect of the change of the child's name on the preservation and development of the child's relationship with each parent; (3) the length of time the child has borne a given name; (4) the degree of community respect associated with the present and proposed names; (5) the difficulties, harassment, or embarrassment that the child may experience from bearing the present or proposed name; and (6) the existence of any parental misconduct or neglect. (See *Poindexter v. Poindexter*, 360 Ark. 538 (2005)).

You should be prepared to answer questions from the judge regarding the issues listed above. In addition, you may also submit additional evidence showing why the change is in the child's best interest. Additional evidence could include, for example, letters: from health care professionals confirming the child's gender identity; from teachers, family, or friends confirming the use of the child's preferred name, etc.

ARKANSAS

NAME & GENDER CHANGE GUIDE

Updated January 2020



**ARKANSAS
TRANSGENDER
EQUITY
COLLABORATIVE**

ArTEC | www.artransequity.org

Appendix

**COVER SHEET
STATE OF ARKANSAS
CIRCUIT COURT: CIVIL**

The civil reporting form and the information contained herein shall not be admissible as evidence in any court proceeding or replace or supplement the filing and service of pleadings, orders, or other papers as required by law or Supreme Court Rule. This form is required pursuant to Administrative Order Number 8. Instructions are available at www.arcourts.gov. 1/1/2017

County: _____ **District:** _____ **Filing Date:** _____
Judge: _____ **Division:** _____ **Case ID:** _____

Type of case (select one that best describes the subject matter): _____

Plaintiff		Defendant	
Company/ Last Name		Company/ Last Name	
Suffix		Suffix	
First Name		First Name	
DL/State ID		DL/State ID	
Address		Address	
City, State ZIP		City, State ZIP	
Phone		Phone	
Email		Email	
Self-represented	<input type="radio"/> Yes <input type="radio"/> No	Self-represented	<input type="radio"/> Yes <input type="radio"/> No
DOB		DOB	
Interpreter needed?	<input type="radio"/> Yes: _____ <input type="radio"/> No other language: _____	Interpreter needed?	<input type="radio"/> Yes: _____ <input type="radio"/> No other language: _____

Attorney of Record: _____
 For the: Plaintiff Defendant Intervenor

Bar #: _____
Email Address: _____

Related Case(s): _____

Judge: _____

Case ID(s): _____

Manner of filing (choose one): _____

6/1/2017

IN THE CIRCUIT COURT OF _____ COUNTY, ARKANSAS
_____ DIVISION

IN RE: _____

PETITION FOR CHANGE OF NAME

The petitioner, _____, hereby states:

1. Petitioner is over the age of eighteen (18) years and is a resident of _____ County, Arkansas.
2. Petitioner wishes to change his/her last name because _____

Therefore, she/he would like to be known henceforth as _____.

WHEREFORE, petitioner requests that an order be entered changing his/her name from

_____ to _____

Respectfully submitted,

Petitioner

[insert name]
[insert address]
[insert phone number]
[insert email address]

IN THE CIRCUIT COURT OF _____ COUNTY, ARKANSAS
_____ DIVISION

IN RE: _____

ORDER FOR NAME CHANGE

On this date, the petition of _____ is presented, the petitioner appearing in person, pro se, and the Court, from the petition filed herein, the testimony given, and other proof before the Court, finds:

The petitioner has shown reasonable cause for changing his/her name.

IT IS THEREFORE ORDERED that petitioner's name be changed from _____ to _____ and that petitioner petitioner shall hereinafter be known as _____, and IT IS IS FURTHER ORDERED that he/she shall sue and be sued, plead and be impleaded, by the name _____.

IT IS FURTHER ORDERED that the petition filed here in and this order be entered by the Clerk upon the record of this Court.

CIRCUIT JUDGE

Date

PREPARED BY:

**DISPOSITION SHEET
STATE OF ARKANSAS
CIRCUIT COURT: CIVIL**

The civil reporting form and the information contained herein shall not be admissible as evidence in any court proceeding or replace or supplement the filing and service of pleadings, orders, or other papers as required by law or Supreme Court Rule. This form is required pursuant to Administrative Order Number 8. Instructions are available at www.arcourts.gov.

Case ID: _____

_____ V _____

Trial Type: (J) Jury Trial (B) Bench Trial (N) Non-Trial

Was an interpreter used for this case? Yes No

For whom? _____

Language: Other: _____

Was any party self-represented for any portion of the case? Yes No If so,

who? _____

Disposition Date: _____

Manner of Disposition (Choose one): _____

If consolidated, case ID: _____

Was a money judgment entered? Yes No Joint & Several

If yes, amount: _____

Judgment for	Amount	Judgment against	Amount

6/1/2017

IN THE _____ COURT OF _____ COUNTY, ARKANSAS

IN RE PETITION OF _____
TO PROCEED IN FORMA PAUPERIS

CASE NO. _____

PETITION FOR LEAVE TO PROCEED IN FORMA PAUPERIS

COMES NOW the Plaintiff, _____, *pro se*, who hereby petitions the court for Leave to Proceed *In Forma Pauperis* and does allege and state as follows:

1. That Plaintiff, a resident of the State of Arkansas, has prepared and desires to file with this Court a _____.

2. That Plaintiff has completed an Affidavit in Support of Request to *Proceed In Forma Pauperis* setting out his/her income and assets. Plaintiff's Affidavit accompanies this petition.

3. That Plaintiff's income barely suffices to meet the costs of life's daily essentials and includes no allotment that could be budgeted to pay for court fees and costs incident to this proceeding.

4. That Plaintiff has no other income in addition to that described in his/her Affidavit and no means of paying such costs without being reduced to total impoverishment.

6. That Plaintiff believes that he/she is entitled to the relief requested in the accompanying _____ and that such action is not brought for a frivolous or malicious purpose.

WHEREFORE, Plaintiff prays that the court enter an order allowing the Plaintiff to prosecute this action *In Forma Pauperis* and that the Plaintiff may have the necessary writs and processes without payment of fees or costs for the same.

Respectfully submitted,

SIGNATURE: _____

NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

IN THE _____ COURT _____, COUNTY, ARKANSAS

IN RE PETITION OF _____
TO PROCEED IN FORMA PAUPERIS

NO. _____

**AFFIDAVIT IN SUPPORT OF
REQUEST TO PROCEED IN FORMA PAUPERIS**

I, _____, being first duly sworn, depose and say that I am the petitioner in the above entitled case; that in support of my motion to proceed without being required to prepay fees, costs or give security therefor, I state that because of my poverty I am unable to pay the costs of said proceeding or to give security therefor; that I believe I am entitled to redress.

I further swear that the responses which I have made to questions and instructions below are true.

1. Are you presently employed? Yes No

(a) If the answer is yes, state the amount of your salary or wages per month, and give the name and address of your employer.

(b) If the answer is no, state the date of last employment and the amount of the salary and wages per month which you received.

2. Have you received within the past twelve months any money from any of the following sources?

(a) Business, profession or any form of self-employment?

Yes No

(b) Rent payments, interest or dividends?

Yes No

(c) Pensions, annuities or life insurance payments?

Yes No

(d) Gifts or inheritances?

Yes No

(e) Any other sources?

Yes No

If the answer to any of the above is yes, describe each source of money and state the amount received from each during the past twelve months.

3. Do you own any cash, or do you have money in a checking or savings account?

Yes No

If the answer is yes, state the total amount in each account.

4. Do you own any real estate, stocks, bonds, notes, automobiles or other valuable property (excluding ordinary household furnishings and clothing)?

Yes No

If the answer is yes, describe the property and state its approximate value.

5. List the persons who are dependent upon you for support, state your relationship to those persons, and indicate how much you contribute toward their support.

[6. TO BE COMPLETED ONLY IF PETITIONER IS INCARCERATED IN THE ARKANSAS DEPARTMENT OF CORRECTION OR ANY OTHER PENAL INSTITUTION.

Do you have any funds in the inmate welfare funds?

Yes No

If the answer is yes, state the total amount in such account and have the certificate found below completed by the authorized officer of the institution.]

I understand that false statement or answer to any questions in this affidavit will subject me to penalties for perjury.

Respectfully Submitted,

Petitioner

[insert name]
[insert address]
[insert phone number]
[insert email address]

STATE OF _____

COUNTY OF _____

Petitioner, _____, being first duly sworn under oath, presents that he/she has read and subscribed to the above and states that the information therein is true and correct.

SUBSCRIBED AND SWORN to before me this _____ day of _____,
2_____.

Notary Public

My commission expires: _____

[(To be completed by authorized officer of penal institution)]

CERTIFICATE

I hereby certify that the petitioner herein, _____, has the sum of \$ _____ on account to his/her credit at the _____ institution where he/she is confined.

I further certify that petitioner likewise has the following securities to his/her credit according to the records of said institution:

_____.

Authorized Officer of Institution

IN THE _____ COURT OF _____ COUNTY, ARKANSAS

IN RE PETITION OF _____
TO PROCEED IN FORMA PAUPERIS

CASE NO. _____

ORDER GRANTING LEAVE TO PROCEED IN FORMA PAUPERIS

On this day comes on to be heard the petition of _____, that he/she be permitted to prosecute the above action *In Forma Pauperis*. The Court being satisfied of the truth of the facts alleged and good cause appearing thereto, IT IS HEREBY ORDERED:

1. That Plaintiff, _____, be authorized and permitted to proceed in the above-captioned cause, *In Forma Pauperis*.
2. That the Clerk of the Court shall receive and file any necessary forms or pleadings incident to petitioner's action without requiring the payment of fees or costs.
3. That the sheriffs of the counties of the State of Arkansas shall serve writs or processes incident to petitioner's action without requiring the payment of fees or costs.
4. That no other officer shall require of the petitioner any fee or cost incident to this action.

IT IS SO ORDERED.

Judge

Date

Letter Certifying Applicant's Gender Change

I, _____,
(Physician's Full Name)

_____, _____,
(Physician's medical license/certificate number) (Issuing State/Country of license/certificate)

am the physician of _____,
(Name of Patient)
_____. (Date of Birth of Patient)

with whom I have a doctor/patient relationship and whom I have treated, or with whom I have a doctor/patient relationship and whose medical history I have reviewed and evaluated.

_____,
(Name of Patient)

has had appropriate clinical treatment for transition to male female.

I declare under penalty of perjury under the laws of the United States that the foregoing is true and correct.

Signature of Physician

Physician's Address

Typed Name of Physician

Date

Physician's Phone Number

From: Gayle Boliou [mailto:Gayle.Boliou@dfa.arkansas.gov] Sent: Thursday,
April 07, 2011 3:38 PM
To:
Subject: Forms request

To change your name and gender there are no forms. You simple go to your local Arkansas revenue office and bring your current driver's license along with either a marriage license, divorce decree, specifically stating you may change your name, or court order for a name change. For gender change no documentation is required you just have the clerk change it for you .

Gayle Boliou, Supervisor Driver
License Issuance Driver Services
Telephone: [501-682-7053](tel:501-682-7053)
Fax: [501-682-7934](tel:501-682-7934)

Sent from my iPhone

December 3, 2010

Changing gender on a Driver License-Our official policy is to allow a licensee to change their gender as requested , no questions asked, no documentation required. Please see that this policy is followed .

Mike Munns ,
Assistant Commissioner Operations & Administration

Driver's License Gender Designation Form

TO BE COMPLETED BY APPLICANT		
(Last Name)	(First Name)	(Middle Name)
(Social Security Number)	(License/Identification Card Number)	
(Street Address)		
(City)	(State)	(Zip Code)
I, _____ wish to change the gender on my (Print Name)		
driver's license / identification card to read:	Male	Female X (Circle One)
<i>I hereby certify under penalty of law that this request for gender designation is for the purpose of ensuring my driver's license / identification card accurately reflects my gender identity and is not for any fraudulent or other unlawful purpose.</i>		
(Signature of Applicant)	(Date)	

[Licensed Physician's Letterhead]
[Including Physician's Address and Telephone
Number]

Sample Doctor's Letter

Sex Designation Change - U.S. Passport

I, [physician's full name], [physician's medical license or certificate number], [issuing State of medical license/certificate], am the physician of [name of patient], whom I have treated (or whose medical history I have reviewed and evaluated).

[Use this language if the patient's gender transition is completed:]

[Name of patient] has had appropriate clinical treatment for gender transition to the new gender of [female or male].

OR

[Use this language if the patient's gender transition is in process:]

[Name of patient] is in the process of gender transition to the new gender of [female or male].

I declare under penalty of perjury under the laws of the United States that the forgoing is true and correct.

[Signature of Physician]
[Typed Name of Physician]
[Date]

**COVER SHEET
STATE OF ARKANSAS
CIRCUIT COURT: CIVIL**

The civil reporting form and the information contained herein shall not be admissible as evidence in any court proceeding or replace or supplement the filing and service of pleadings, orders, or other papers as required by law or Supreme Court Rule. This form is required pursuant to Administrative Order Number 8. Instructions are available at www.arccourts.gov. 1/1/2017

County: _____ **District:** _____ **Filing Date:** _____
Judge: _____ **Division:** _____ **Case ID:** _____

Type of case (select one that best describes the subject matter): _____

Plaintiff		Defendant	
Company/ Last Name		Company/ Last Name	
Suffix		Suffix	
First Name		First Name	
DL/State ID		DL/State ID	
Address		Address	
City, State ZIP		City, State ZIP	
Phone		Phone	
Email		Email	
Self-represented	<input type="radio"/> Yes <input type="radio"/> No	Self-represented	<input type="radio"/> Yes <input type="radio"/> No
DOB		DOB	
Interpreter needed?	<input type="radio"/> Yes: _____ <input type="radio"/> No other language: _____	Interpreter needed?	<input type="radio"/> Yes: _____ <input type="radio"/> No other language: _____

Attorney of Record: _____
 For the: Plaintiff Defendant Intervenor

Bar #: _____
Email Address: _____

Related Case(s): _____

Judge(s): _____

Manner of Filing (choose one): _____

Case ID(s): _____

6/1/2017

IN THE CIRCUIT COURT OF _____ COUNTY, ARKANSAS
_____ DIVISION

IN RE: (Insert Current Name)

PETITION FOR CHANGE OF GENDER

Comes, the petitioner, (Insert Current Name), *pro se*, and respectfully states and alleges:

1. That the petitioner is a resident of (Insert County), Arkansas.
2. That petitioner is over the age of eighteen (18) years.
3. Petitioner's Certificate of Birth, issued by the Arkansas Department of Health, Division of Vital Records, currently designates Petitioner's gender status as (Insert Gender on Birth Certificate).
4. Petitioner has undergone a surgical procedure to change (Insert Gender Pronoun) gender from (Insert Gender of Birth Certificate) to (Insert Gender Desired to Appear on Birth Certificate). (*See affidavit of surgeon attached to this Petition as Exhibit A.*)
5. Petitioner desires a legal change of gender designation from (Insert Gender of Birth Certificate) to (Insert Gender Desired to Appear on Birth Certificate) and that a substituted Certificate of Birth be issued designating Petitioner's gender as (Insert Gender Desired to Appear on Birth Certificate) pursuant to A.C.A. § 20-18-307(d).
6. Petitioner states and affirms that (Insert Gender Pronoun) desire for a change of gender designation is not for the purpose of fraud, misrepresentation, interference with the rights of others, escaping any debt, or for any other illegal purpose.

ACCORDINGLY, Petitioner requests that this Court enter an Order authorizing a legal change of Petitioner's gender designation from (Insert Gender of Birth Certificate) to (Insert Gender Desired to Appear on Birth Certificate) in accordance with the laws of Arkansas; that a substituted Certificate of Birth designating Petitioner's gender as male be issued; and for all other just and proper relief.

Respectfully Submitted,

Petitioner

[insert name]
[insert address]
[insert phone number]
[insert email address]

VERIFICATION

STATE OF ARKANSAS)
) SS
COUNTY OF Insert County)

The undersigned, being duly sworn, states on oath that (Insert Gender Pronoun) has reviewed the above named pleading and that the facts and matters contained therein are true and correct to the best of (Insert Gender Pronoun) knowledge and belief.

SUBSCRIBED AND SWORN to before me this ___ day of _____, 20___.

NOTARY PUBLIC

My Commission Expires

IN THE CIRCUIT COURT OF (Insert County) COUNTY, ARKANSAS
_____ DIVISION

IN RE: (Insert Current Name)

ORDER FOR CHANGE OF GENDER

On this date, the petition of (Insert Current Name) is presented, the petitioner appearing *pro se*, and the Court, from the petition filed herein, with testimony given, or other proof before the Court, finds:

1. Petitioner's date of birth is (Insert Date of Birth)
2. Petitioner's gender has been changed by surgical procedure from (Insert Gender of Birth Certificate) to (Insert Gender Desired to Appear on Birth Certificate).
3. Petitioner has shown reasonable cause, pursuant to A.C.A. § 20-18-307(d), for changing (Insert Gender Pronoun) gender designation to (Insert Gender Desired to Appear on Birth Certificate) and for requesting a new birth certificate.

IT IS, THEREFORE, ORDERED, that Petitioner's gender designation shall from this time forward be (Insert Gender Desired to Appear on Birth Certificate) and that the Arkansas Department of Health, Division of Vital Records, shall issue a new certificate of birth reflecting the gender as ordered herein.

CIRCUIT JUDGE

DATE

AFFIDAVIT OF SURGEON
IN SUPPORT OF PETITION FOR CHANGE OF GENDER
AND AMENDED BIRTH CERTIFICATE

Before the undersigned, _____, a Notary Public, duly
(Print Notary Name)
qualified and acting in and for this county and state, appeared Dr. _____,
(Doctor's Name)
satisfactorily proven to be the affiant herein, who stated the following under oath:

1. Affiant's name is _____ (Doctor's Name).
2. Affiant is a physician licensed in [Physician State] with valid medical license number _____.
3. Affiant's medical office is located at _____,
and has telephone number _____.
4. On [Date of Surgery], in [City, State of Surgery], Affiant performed surgical and medical procedures on Petitioner to change Petitioner's sex from [male/female] to [male/female].
5. Affiant's professional medical opinion is that Petitioner's birth certificate should be amended as requested in [his/her] Petition for Change of Gender and Amended Birth Certificate [or other title of Petition].
6. Affiant has read the foregoing statements and swears under oath that the statements contained in this Affidavit are true and correct to the best of Affiant's knowledge, information and belief.

Affiant Signature: _____

Affiant Printed Name: _____

ACKNOWLEDGMENT

State of [Notary State] }
County of [Notary County] }

Subscribed and sworn to before me, a Notary Public, on this ____ day of _____, _____.
(seal)

Notary Public Signature
My Commission Expires: _____

AFFIDAVIT OF PHYSICIAN
IN SUPPORT OF PETITION FOR CHANGE OF GENDER
AND AMENDED BIRTH CERTIFICATE

Before the undersigned, _____, a Notary Public, duly
(Print Notary Name)
qualified and acting in and for this county and state, appeared Dr. _____

(Doctor's Name), satisfactorily proven to be the affiant herein, who stated the following under oath:

1. Affiant's name is _____ (Doctor's Name).
2. Affiant is a physician licensed in Arkansas with valid medical license number _____.
3. Affiant's medical office is located at _____, and has telephone number _____.
4. Affiant has a current doctor-patient relationship with Petitioner. Affiant has treated Petitioner for gender-related care after Petitioner's sex was changed by surgical and medical procedures which took place on [Date of Surgery], in [City, State of Surgery].
5. In Affiant's professional medical opinion, Petitioner's birth certificate should be amended as requested in Petitioner's Petition for Change of Gender and Amended Birth Certificate [or other title of Petition].
6. Affiant has read the foregoing statements and swears under oath that the statements contained in this Affidavit are true and correct to the best of Affiant's knowledge, information and belief.

_____, Affiant Signature

_____, Affiant Printed Name

ACKNOWLEDGMENT

State of [Notary State] }
County of [Notary County] }

Subscribed and sworn to before me, a Notary Public, on this ____ day of _____, _____.
(seal)

Notary Public Signature
My Commission Expires: _____