|  |  |
| --- | --- |
| **Petition for** **[ ]**  **Divorce** **[ ]  Legal Separation***(Petition for Dissolution of Marriage or Legal Separation)* | JDF 1101**Court Use Only** |
| District CourtColorado County: **WELD** Court Address: **PO BOX 2038, GREELEY, CO 80632** **Parties**Petitioner *(Parent or person who started the legal case):*  Co-Petitioner/Respondent *(Other person in this case):*  |
| Lawyer (if any)Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Lawyer Reg. #: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | CaseNumber: Division: Courtroom:  |

1. Petitioner’s Information [ ]  Check if in Military

Full Legal Name: Date of Birth:

List dates of Colorado residency  *(MM/YY):* from: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to:

Current Mailing Address: Apt. #

City: State: Zip:

Phone: Email:

[ ]  Check here if you consent to receive court filings (service) by email. *C.R.C.P. 5(b)(2)(D).*

Do you need an interpreter? [ ]  No [ ]  Yes, in (language):

1. Co-Petitioner/Respondent’s Information [ ]  Check if in Military

Full Legal Name: Date of Birth:

How long living in Colorado?List dates *(MM/YY):* from: to:

Current Mailing Address: Apt. #

City: State: Zip:

Phone: Email:

[ ]  Check here if you consent to receive other’s court filings (service) by email. *C.R.C.P. 5(b)(2)(D).*

Do you/they need an interpreter? [ ]  No [ ]  Yes, in (language):

1. Information about the Marriage

The parties were married on *(date):* in *(city/state or country):*

The parties separated on *(date):* .

The marriage is irretrievably broken and cannot be repaired.

Is either party expecting a child? **[ ]  Yes** **[ ]  No**

1. List all child(ren) of this relationship under the age of 19

|  |  |  |  |
| --- | --- | --- | --- |
| **Full name of child** | **Current Address** | **Sex** | **Date of Birth** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. **Native American Indian Heritage:**

Are the above child(ren) Native American Indian? **[ ]  Yes** **[ ]  No**

If yes, are the children subject to the Indian Child Welfare Act? **[ ]  Yes** **[ ]  No**

Tribe (if known):

Note: You must also file JDF 1350 – Indian Child Welfare Act (ICWA) Assessment Form.

1. Have all child(ren) of the marriage lived in Colorado for at least 182 days before this Petition was filed? (Or since birth if the child is under 6 months old?) **[ ]  Yes** **[ ]  No**

If ***No,*** where has that child has been living?

|  |  |  |  |
| --- | --- | --- | --- |
| **Full Name of Child** | **Name of Person Child Lived with in Last 6 Months (if not parent)** | **State Moved From** | **Date Moved to Colorado (MM/DD/YY)** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

1. List the name and address of each person the child(ren) lived with over the last 5 years. Explain that person’s relationship to the child(ren).

|  |  |  |
| --- | --- | --- |
| **Person’s Name & Relationship to Child** | **Address (City/State/Zip)** | **Dates Lived with Child(ren)MM/YY – MM/YY** |
|  |  |  |
|  |  |  |
|  |  |  |

1. I/We understand that either parent (or party) may ask for genetic testing. The request will not affect how the court looks at the case. If genetic tests are not provided to the court before it makes its final decision in this case, they may not be allowed as evidence at a later date. C.R.S. § 14-10-124(1.5), (3.5).
2. Other Court Cases

List all cases the parents, child(ren), or other parties have been involved in, such as parental responsibilities, child support, divorce, domestic violence, restraining orders, adoption, etc. Include all cases in any state.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Name of Court** | **Case Number** | **State** | **Hearing Date** | **Kind of Case** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1. Other People with Parental Responsibilities

List all people who are *not* parties in this case but have (or say they have) visitation rights of the child(ren), such as grandparents or other relatives.

|  |  |
| --- | --- |
| **Person’s Name / Relationship to Child** | **Address (City/State & Zip)** |
|  |  |
|  |  |

## Notices

1. [ ]  Check here if there’s a case with Child Support Services (CSS)

If *so****,*** write the case number here: County: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Human Services or Social Services Department Benefits**

Has any child, parent, or other party listed on this form received benefits or services in the last 5 years from the state? **[ ]  Yes** **[ ]  No**

If yes, describe: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Benefits received from County \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ State \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Active Protection or Restraining Orders**

Has anyone listed above been named in a protection/restraining order?[ ]  Yes[ ]  No

If Yes**:**

The Protection / Restraining Order was: [ ]  Temporary [ ]  Permanent

 [ ]  MRO (Criminal Restraining Order)

Made by the following court: [ ]  Municipal Court [ ]  County Court [ ]  District/Juvenile Court

Court location (County & State):

Case number:

Date of Order:

Name of protected person(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of restrained person:

What did the Protection/Restraining Order say? [ ]  Stay-away [ ]  No contact

 [ ]  Other *(explain):*

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. I/We ask that the Court make orders about *(check all that apply):*

⬜ the status of this marriage

⬜ the parenting plan for the child(ren) in this case

⬜ maintenance (spousal support)

⬜ child support

⬜ division of property and debts

⬜ lawyer fees and costs

⬜ restoring a party’s (or parties’) last name(s)

⬜ other orders *(specify):*

1. The ⬜ Petitioner ⬜ Co-Petitioner/Respondent asks the Court to restore his/her **prior full name** to *(list prior first, middle, last name):* .

|  |
| --- |
| ***Notice:*** *Colorado Revised Statutes § 14-10-107, provides that upon the filing of a Petition for Dissolution of Marriage or Legal Separation by the Petitioner and Co-Petitioner, or upon personal service of the Petition and Summons on the Respondent, or upon waiver and acceptance of service by the Respondent, an automatic temporary injunction shall be in effect against* ***both parties*** *until the Final Decree is entered, or the Petition is dismissed, or until further Order of the Court. Either party may apply to the Court for further temporary orders, an expanded automatic temporary injunction, or modification or revocation under C.R.S. § 14-10-108 or any other appropriate statute.* |

1. Automatic Court Orders (Temporary Injunction)

When this form is filed (or served or received by the Respondent) you and the other parent (or party) **must** obey the orders listed below. You must obey these orders until this case is finalized, dismissed, or the court changes these orders.

* Do ***not*** sell, transfer, assign, borrow against, hide, or get rid of any marital property without permission of the other parent (or party) or the court. You may use your income for your usual business expenses and your usual life necessities.
* Do ***not*** disturb the peace of the other parent or parties in this case.
* Do ***not*** take the child(ren) in this case out of the state without permission from the court and/or the other parent (or party).
* Do ***not*** stop paying, cancel, or make any changes to health, homeowner’s, renter’s, automobile, or life insurance policies that cover the child(ren) or a party in this case or that name a child or a party as a beneficiary.

*Exception:* You may make changes to insurance coverage if you have written permission from the other parent or party or a court order, and you give at least 14 days’ Notice to the other party. C.R.S. § 14-10-107; 14-10-108.

* If either of you wants to change or cancel these orders, you must file papers at court.

My signature below means I have read, understood, and received a copy of the temporary orders listed in 16.

# Verification

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the day of , , at

 (date) (month) (year) (city or other location, and state OR country)

Printed Name of Petitioner Signature of Petitioner

Lawyer Name (if any)Signature of Lawyer (if any)

# Verification

I declare under penalty of perjury under the law of Colorado that the foregoing is true and correct.

Executed on the day of , , at

 (date) (month) (year) (city or other location, and state OR country)

Printed Name of Co-Petitioner/Respondent Signature of Co-Petitioner/Respondent

Lawyer Name (if any)Signature of Lawyer (if any)