

Full name of Respondent: _____

Date of birth: _____ Social Security Number: _____

Residential address: _____ Apt. # _____

City: _____ State: _____ Zip Code: _____

Mailing address (if different from residential address): _____ Apt. # _____

City: _____ State: _____ Zip Code: _____

Telephone Numbers: Home _____ Work _____ Cell _____

Names of children (attach a second sheet, if necessary):

Full Name of Child	Present Address	Sex	Date of Birth	Soc. Sec. No.

- The Petitioner is planning to be self-represented.
- The Co-Petitioner/Respondent is planning to be self-represented.
- Both you and the other party have retained an attorney.

Date: _____

 Petitioner Co-Petitioner/Respondent