# PETITION FOR PARENTAGE, CUSTODY, OR VISITATION FOR PERSONS WITHOUT AN ATTORNEY

#### THIS PETITION IS TO:

ESTABLISH PATERNITY
CHANGE CUSTODY (NON-EMERGENCY)
SET OR MODIFY VISITATION

CHANGES TO CUSTODY OR VISITATION MAY RESULT IN A CHANGE IN CHILD SUPPORT.

#### STEPS:

- 1. Complete the Petition
- 2. Complete a Summons for each Respondent/Parent
- 3. Pay the \$112 filing fee plus \$42 service fee for each respondent/parent
- 4. If the parent's whereabouts are unknown, you must complete an Affidavit of Diligent Efforts.
- 5. Attend the court date you have been given.

YOU ARE ENCOURAGED TO CONSULT A COMPETENT ATTORNEY.
THIS OFFICE CANNOT AND WILL NOT PROVIDE LEGAL ADVICE.

### IN THE JUVENILE COURT OF CHEATHAM COUNTY, TENNESSEE

|   |   | DOCKET NO   |
|---|---|---|
| PETITIONER  Patitioner Palationshi                    | n to the Child  |   |
| Petitioner Relationshi                                | p to the Child  |   |
| VS  |   |   |
| RESPONDENT  |   |   |
| Respondent Relations                                  | hip to the Child  |   |
| REGARDING   | CHILDREN UNDER EIG  | HTEEN (18) YEARS OF AGE.  |
|   |   | DOB   |
|   |   | DOB   |
|   | ILD/REN'S NAME/S  | DOB   |
|   | PRO SE PETITION UNI   | DER TITLE 36  |
| The Petitioner asks this                              | honorable Court to: (check all                                | that apply)   |
| □ establish parentage                                 | □ change custody  | □ set or modify visitation  |
| In support of this petition and complete all that app |   | the following to the court: (check  |
| The Mother and A                                      | ardian □ Alleged Father/s □ (<br>lleged Father/s were never m | Child/ren live in Cheatham County, TN.<br>arried.<br>tercourse during the period of conception of |
|   |   | ed as a result of that intercourse.   |
|   | bo:   | rn on   |
|   | bo  | rn on   |

To change custody:

| ·        | Pursuant to a hearing on, custody was granted to Respondent.   |
|----------|--|
|          | There is not presently any order granting custody of the child/ren to either party, but the Petitioner has physical possession of the child/ren.   |
|          | The Petitioner $\square$ has $\square$ has not participated (as a party, witness, or any other capacity) in  |
|          | any other litigation concerning custody of the child/ren in this or any other state.   |
|          | The Petitioner □ does □ does not know of any person not a party to this proceeding who has physical custody of the child/ren or who claims to have custody of or visitation rights with the child/ren. |
|          | There has been a substantial and material change of circumstances that warrants a change of custody in this matter as follows:   |
|          |  |
|          |  |
|          |  |
|          |  |
| To se    | et visitation:   |
|          | There has not been a previous order of visitation established in this matter.  |
|          | The Petitioner is the non-custodial parent of the child/ren and is requesting that visitation  |
|          | be set.  |
|          | The Petitioner is the guardian or custodial parent of the child/ren and is requesting that   |
|          | visitation be set.   |
| an.      |  |
| To m     | nodify visitation:   |
|          | A previous order of visitation was established by this Court on  The existing visitation order allowed visitation as follows:  |
|          | The existing visitation order anowed visitation as ionows.   |
|          |  |
|          | The existing visitation order needs to be modified because:  |
|          |  |
| The      | refore, the Petitioner requests: (check and complete all that apply)   |
| Тое      | stablish parentage:  |
| <u> </u> | Proper process issue and the Respondent be required to answer in the time allowed.   |
|          | 1 1  |

|             | An order of parentage be entered in thi  | s matter which will include:              |                |  |
|-------------|--|---|----------------|--|
|             | a. A determination of the availabili   | ity of health insurance to cover the c    | hild/ren and   |  |
|             | other appropriate orders regarding allocation of health care costs;                                  |   |                |  |
|             | b. A determination of the child/ren's name/s on the birth certificate/s;                             |   |                |  |
|             | c. A determination of the custody of the child/ren;  |   |                |  |
|             | d. A determination of visitation or parental access;   |   |                |  |
|             | e. A determination of child support;   |   |                |  |
|             | f. A determination of retroactive su   |   |                |  |
|             |  | he mother's reasonable expense for h      | ner pregnancy  |  |
|             | confinement, and recovery to eit.  |   | ror programmy, |  |
|             | Other specific requests:   |   |                |  |
|             | The costs of this be assessed to the Res   | pondent;                                  |                |  |
| $\boxtimes$ | For other appropriate relief.  |   |                |  |
| ran 1       |  |   |                |  |
| To ch       | <u>ange custody</u> :<br>⊠ Proper process issue and that this m                                      | nattor he set for an initial annearance   | e hafore the   |  |
|             | Court;   | latter be set for all lilitial appearance | e perore the   |  |
|             | stody of the child/ren be changed from t   | he Respondent to the Patitioner           |                |  |
| <u> </u>    | stody of the chindren be changed from $\mathfrak t$<br>$\square$ The Respondent be ordered to pay cl | <del>-</del>                              | ld Support     |  |
|             |  | and support pursuant to the TN On         | iu Support     |  |
|             | Guidelines;  |   |                |  |
| <u> </u>    | Respondent be granted visitation;  |   |                |  |
| Б           | The costs of this be assessed to the   |   |                |  |
| Respo       | ondent;  |   |                |  |
|             | $\boxtimes$ For other appropriate relief.  |   |                |  |
| To se       | t or modify visitation:  |   |                |  |
|             | Proper process issue and the Respon  | ndent be ordered to appear and show       | cause why      |  |
|             | visitation should not be set or modified   | =   | ·              |  |
|             | □ The Court set or modify visitation a   | -   |                |  |
|             | $\Box$ The costs of this be assessed to the l  |   |                |  |
|             | <ul><li></li></ul>   | F,  |                |  |
|             | = 101 other appropriate rener.   |   |                |  |
|             |  | Respectfully Submitted,                   |                |  |
|             |  |   |                |  |
|             |  |   |                |  |
|             |  | Petitioner                                |                |  |
| Sworn       | to and subscribed before me this   | day of                                    | 20 .           |  |
|             |  | ·,  | ·              |  |
|             |  |   |                |  |
|             |  | Notary / Deputy Clerk                     |                |  |
|             |  | My commission expires                     |                |  |

#### OATH

| STATE OF TENNESSEE<br>COUNTY OF CHEATHAM | )              |         |                                   |  |
|--|----------------|---------|-----------------------------------|--|
|  |                |         | w, make oath that the facts soled |  |
| Sworn to and subscribed k                | nefore me this |         |                                   |  |
| day of                                   |                |         |                                   |  |
| Notary Public/ Deputy Cle                | rk             | –<br>My | commission expires:               |  |

## IN THE JUVENILE COURT OF CHEATHAM COUNTY, TENNESSEE

|  | DOCKET NO  |
|--|--|
| PETITIONER   |  |
| VS   |  |
|  | RESPONDENT   |
| IN RE:   | DOB  |
|  | DOB  |
|  | DOB  |
| CHILD/RI   | EN'S NAME/S  |
| 1. The whereabouts of the fold Mother:    Father: Legal Custodian: know how to locate the named 3. The last time I had contact the second seco | 2. I do not person/people to notify them of this proceeding.   |
| 4. The last address I am awa   | are of these people living or staying at is:   |
| I contacted the following frie   | o attempt to contact the named people about this proceeding:   nds, family, or acquaintances of the above people about these |
| reached out to the named peo   | onle through social modic  |
| -  | phone number I have for the named people.  |
|  | with all information in my possession that would help the court  |

- 7. I understand that I am under a court order to provide the court with any additional information that comes to my attention about how to contact the named people.
- 8. I understand that if I come in contact with the named people, I am ordered to tell them about these proceedings, about any orders that have been issued by the court, and any court dates that I am aware and to advise them to contact Juvenile Court.

| Affiant:                                 |                       |
|--|-----------------------|
| Sworn to and subscribed before me this20 | day of,               |
| Notary / Deputy Clerk                    | My commission expires |

# CHEATHAM COUNTY JUVENILE COURT GENERAL DATA FORM----CHILD'S PERSONAL RECORD (Please Print Legibly and Answer all questions completely)

| DOCKET #:                                | 1                     | HOME PHONE:                 |  |
|--|-----------------------|-----------------------------|--|
| DATE:                                    |                       |                             |  |
| INITIALS:                                | WORK PHONE:           |                             |  |
| FULL NAME:                               | SOCIAL SECURITY       | Y:                          |  |
| CURRENT ADDRESS:                         |                       |                             |  |
| IN SCHOOL? NAME OF SCHOOL:               |                       |                             |  |
| DO YOU WORK? EMPLOYER NAME & A           |                       |                             |  |
| LIVING ARRANGEMENT OF CHILD:             |                       |                             |  |
|  | WITH REALTIVES        |                             |  |
|  | WITH ADOPTIVE PARENTS |                             |  |
|  | INDEPENDENT LIVING    |                             |  |
| WITH MOTHER WITH FATHER                  |                       | IN RESIDENTIAL CENTER OTHER |  |
| WITH AHEN                                |                       | OTTEN                       |  |
| DATE OF BIRTH: AGE:                      |                       |                             |  |
| IS THE CHILD OF HISPANIC ORGIN:          |                       |                             |  |
| PLACE OF BIRTH:                          |                       |                             |  |
| DOES CHILD HAVE PREVIOUS ADJUDICATIONS I |                       | DELINQUENT OFFENSES         |  |
|  |                       | DRUG/ ALCOHOL OFFENSES      |  |
|  |                       | STATUS/ UNRULY OFFENSES     |  |
| IF YES, WHEN AND WHAT COURT:             |                       | DEPENDENCY & NEGLECT        |  |
| II 125, WIILIN AND WIIAI COURT.          |                       |                             |  |
|  | FAMILY HISTORY        |                             |  |
|  | I AIVIILI HISTORT     |                             |  |
| MOTHER:                                  | SOCIAL SECURITY#      | <b>#</b> :                  |  |
| ADDRESS:                                 | CITY/ STATE/ ZIP:     |                             |  |
| MARRIED: RACE: BIRTHDATE:                | OCCUPATION:           |                             |  |
| HOME PHONE:                              |                       |                             |  |
| WORK PHONE:                              | WORK ADDRESS: _       |                             |  |
| CELL PHONE:                              |                       |                             |  |
| FATHER:                                  | SOCIAL SECURITY#      | <b>‡</b> :                  |  |
| ADDRESS:                                 | CITY/ STATE/ ZIP:     |                             |  |
| MARRIED: RACE: BIRTHDATE:                | OCCUPATION:           |                             |  |
| HOME PHONE:                              |                       |                             |  |
| WORK PHONE:                              | WORK ADDRESS:         |                             |  |
| CELL PHONE:                              |                       |                             |  |
| LEGAL GUARDIAN:                          | SOCIAL SECURITY       | <b>#</b> :                  |  |
| ADDRESS:                                 |                       |                             |  |
| MARRIED: RACE: BIRTHDATE:                | OCCUPATION:           |                             |  |
| HOME PHONE:                              |                       |                             |  |
| WORK PHONE:                              | WORK ADDRESS:         |                             |  |
| CELL PHONE:                              |                       |                             |  |
| STEP PARENT:                             | SOCIAI SECURITY       | <b>#</b> :                  |  |
| ADDRESS:                                 |                       |                             |  |
| MARRIED: RACE: BIRTHDATE:                |                       |                             |  |
| HOME PHONE:                              |                       |                             |  |
| WORK PHONE:                              | WORK ADDRESS:         |                             |  |
| CELL PHONE:                              | WORK ADDRESS:         |                             |  |

| STATE OF TENNESSEE<br>CHEATHAM COUNTY<br>JUVENILE COURT  | SUMMONS   |                           | CASE FILE NUMBER:  |  |
|--|---|---------------------------|--|--|
| PETITIONER(S):   | RESPONDENT(5):  |                           |  |  |
| TO: (NAME AND ADDRESS OF RESPONDENT)  TO BE SERVED VIA   |   |                           |  |  |
| List each Respondent on a separate su  | mmons.  |                           |  |  |
| YOU ARE HEREBY SUMMONED TO DEFEND A JUVENILE ACTION FILED AGAINST YOU IN THE JUVENILE COURT, CHEATHAM COUNTY, TENNESSEE. YOUR DEFENSE MUST BE MADE WITHIN THIRTY (30) DAYS FROM THE DATE THIS SUMMONS IS SERVED UPON YOU. YOU ARE DIRECTED TO FILE YOUR DEFENSE WITH THE CLERK OF THE COURT AND SEND A COPY TO THE PETITIONER AT THE ADDRESS LISTED BELOW. IF YOU FAIL TO DEFEND THIS ACTION BY THE ABOVE DATE, A JUDGMENT BY DEFAULT CAN BE RENDERED AGAINST YOU FOR THE RELIEF SOUGHT IN THE PETITION. |   |                           |  |  |
| PETITIONER:<br>(Name, address and telephone nur  | nber)   | FILED, ISSUED & ATTESTED  |  |  |
|  |   |                           | JUVENILE COURT CLERK ite 115, Ashland City, TN-Phone: 615/792-7566 |  |
| TO THE SHERIFF: Please execute this summons and make your return within ninety (90) days of issuance as provided by law.   |   | DATE RECEIVED             |  |  |
|  | Termination (30) days of issuance as provided by law. |                           | SHERIFF  |  |
| RETURN ON PERSONAL SERVICE OF SUMMONS  I hereby certify and return that I served this Summons together with the Petition to the Respondent.  |   |                           |  |  |
|  |   |                           |  |  |
| SHERIFF/PRIVATE PROCESSOR/NO By: Sheriff/Private Processor/N   |   | DATE OF PERSONAL SERVICE: |  |  |

#### NOTICE OF PERSONAL PROPERTY EXEMPTION NOTICE TO THE RESPONDENT(S):

Tennessee law provides a ten thousand dollars (\$10,000.00) debtor's equity interest personal property exemption from execution or seizure to satisfy a judgment. If a judgment should be entered against you in this action and you wish to claim property as exempt, you must file a written list, under oath, of the items you wish to claim as exempt with the clerk of the court. Certain items are automatically exempt by law and do not need to be listed; these include items of necessary wearing apparel (clothing) for yourself and your family and trunks or other receptacles necessary to contain such apparel, family portraits, the family Bible, and school books. Should any of these items be seized you would have the right to recover them. If you do not understand your exemption right or how to exercise it, you may wish to seek the counsel of a lawyer. Mail list to: Cheatham County Juvenile Court, 100 Public Square, Suite 115, Ashland City, Tennessee 37015 (Phone: 615/792-7566)