

STATE OF INDIANA

IN THE _____ COURT

COUNTY OF _____

CAUSE NO. _____

IN RE THE MARRIAGE OF:

Petitioner,

v.

Respondent.

APPEARANCE BY UNREPRESENTED PERSON IN CIVIL CASE

1. My name is _____ and I am:

☐ Initiating

and in this case I am not represented by a lawyer.

2. Contact information for receiving legal service of document and case information as required by Court Rules. (*NOTE: If you are the Initiating Party and this case, or a related case, involves a protection from abuse order, a workplace violence restraining order, or a no-contact order, you must provide an address for the purpose of legal service of documents. But, that address should not be one that exposes your location.*)

Address:

Email address: _____

☐ *I will accept service at the above email address.*

Phone:

Fax:

OR, if in a related case, you have used the Attorney General confidential address, you may check the box below:

☐ Attorney General confidential address

3. This is a DC case type as defined in Administrative Rule 8(B)(3).

4. There are related cases: (*If yes, please indicate below*)

☐ Yes

☐ No

Caption and case number of related cases:

Caption: _____ Case No.: _____

Caption: _____ Case No.: _____

Caption: _____ Case No.: _____

Caption: _____ Case No.: _____

Caption: _____ Case No.: _____

Caption: _____ Case No.: _____

Additional information as required by local rule:

Signature

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of this document on _____ by first-class U.S. mail, postage prepaid to _____ at the following address:

Signature

NOT FOR PUBLIC ACCESS IN ACCORDANCE WITH INDIANA RULES ON ACCESS TO COURT RECORDS

**ATTENTION CLERK: FOR SELF REPRESENTED LITIGANTS TREAT THIS FORM AS IF IT
IS PRINTED ON LIGHT GREEN PAPER. IF E-FILED, FILE AS A CONFIDENTIAL
DOCUMENT.**

STATE OF INDIANA IN THE _____ COURT

COUNTY OF _____ CAUSE NO: _____

IN THE _____ OF

Minor Child (*paternity only*)

Petitioner

vs.

Respondent

CIVIL APPEARANCE FORM

Social security numbers of all family members in cases involving child support

Name: _____	SS# _____
Name: _____	SS# _____
Name: _____	SS# _____
Name: _____	SS# _____
Name: _____	SS# _____
Name: _____	SS# _____

NOT FOR PUBLIC ACCESS

STATE OF INDIANA IN THE _____ COURT
COUNTY OF _____ CAUSE NO. _____

IN RE THE MARRIAGE OF:

Petitioner,

and

Respondent.

VERIFIED PETITION FOR DISSOLUTION OF MARRIAGE

☐ With Request for Provisional Orders

The Petitioner, _____, now states:

1. Petitioner's residential address is:

_____.

2. Respondent's residential address is:

_____.

3. Petitioner has been a resident of the state of _____ for ____ years
and ____ months and a resident of _____ County for ____ years and ____ months.

4. Respondent has been a resident of the state of _____ for ____ years
and ____ months and a resident of _____ County for ____ years and ____ months.

5. _____ has been a continuous resident of
_____ County or stationed at a United States military
installation within the county for the last three (3) months.

6. _____ has been a continuous resident of the
State of Indiana or stationed at a United States military installation within Indiana for the last six
(6) months.

7. Petitioner and Respondent were married on _____,
and separated on _____.

8. There are _____ children of the parties currently living who are either less than twenty-one (21) years of age or incapacitated, namely:

Name and Date of Birth	Age	Address

9. Petitioner _____ pregnant.
Respondent _____ pregnant.

10. The parties' marriage has suffered an irretrievable breakdown.

11. ☐ I am filing this petition on my own behalf.

-OR-

☐ I am the guardian of _____ and am filing this petition because _____ is incapacitated. My name is _____ and my address is: _____

_____ and I have attached a copy of the court order granting me authority to petition for dissolution of marriage described in IC 29-3-9-12.2.

12. _____ is the fit and proper person to have custody of the minor child(ren).

13. An order for child support and parenting time should be issued.

14. ☐ There are no other open cases related to this/these child(ren).

-OR-

☐ There are other open cases related to this/these child(ren). They are:

Location (County and State)

Cause/Case Number

15. Petitioner _____ a lifetime sex or violent offender.
Respondent _____ a lifetime sex or violent offender.

16. Debts.

☐ There are no debts to divide.

-OR-

☐ Petitioner wishes the court to divide the following debts.

- a. _____

- b. _____

- c. _____

- d. _____

17. Assets and property.

☐ There are no assets to divide.

-OR-

☐ Petitioner wishes the court to divide the following assets, including personal property.

- a. _____

- b. _____

- c. _____

- d. _____

18. Change of name:

☐ Wife would like the following former name restored

_____.

☐ Wife does not request a name change.

I request that this Court issue its order dissolving the marriage of the parties, and for all other just and proper relief.

I request this Court issue the following provisional orders in regard to the following, to be in effect until this matter is finalized:

19. Select from the following:

☐ I do not request any provisional orders.

-OR-

- ☐ Temporary custody of the minor child(ren);
- ☐ Temporary child support for the minor child(ren);
- ☐ Temporary parenting time for the noncustodial parent;
- ☐ Temporary possession of the marital residence;
- ☐ Temporary division of debts;
- ☐ Temporary division of property;
- ☐ Temporary division of motor vehicles;
- ☐ Spousal maintenance;

- ☐ Restraining the parties from removing the child(ren) from the state without the permission of the court or all parties;
- ☐ Restraining the parties from transferring, encumbering, concealing, or in any way disposing any of the property of the parties;
- ☐ Other:

The undersigned affirms under penalties for perjury that the foregoing representations and statements are true.

Signature

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of this document on _____ by first-class U.S. mail, postage prepaid to _____ at the following address:

Signature

IN THE _____ COURT

CAUSE NO. _____

Petitioner,

Respondent.

[For Dissolution of Marriage Cases Only]

The State of Indiana to Respondent: _____

If this Summons is accompanied by an Order Setting Hearing, you must appear in Court on the date and time stated on the Order Setting Hearing. IF YOU DO NOT APPEAR, EVIDENCE MAY BE HEARD AND A DECISION MAY BE MADE BY THE COURT. If a Temporary Restraining Order is issued, it is effective immediately upon your receipt or knowledge of the Order.

If you take no action in this case after receipt of this Summons, the Court can grant a Dissolution of Marriage and/or make determinations that may include but not limited to any of the following: paternity, child custody, child support, maintenance, parenting time, property (real or personal), and other distribution of assets and debts, attorney fees and costs.

Dated: _____, Clerk
_____, County

The following manner of service of Summons is hereby designated:

- ☐ Registered/Certified mail to be sent by the Clerk
- ☐ Service by Sheriff on Individual at address shown above
- ☐ Service by Sheriff at place of employment, (name and address of spouse's employer)

SHERIFF'S RETURN OF SERVICE OF SUMMONS

I hereby certify that I have served this summons on the ____ day of _____, 20____.

By delivering a copy of the Summons and a copy of the complaint to the Respondent identified on the first page of the Summons.

By leaving a copy of the Summons and a copy of the complaint/petition at:

which is the dwelling place or usual place of abode of the Respondent and by mailing a copy of the Summons to the Respondent at the above address.

Other Service or Remarks: _____.

Sheriff's costs

Sheriff

By: _____
Deputy

CLERK'S CERTIFICATE OF MAILING

I hereby certify that on the ____ day of _____, 20____, I mailed a copy of this Summons and a copy of the Petition to the Respondent identified on the first page of the Summons by (registered or certified mail), _____ requesting a return receipt, at the address provided by the Petitioner.

Dated: _____

Clerk, _____ County

RETURN ON SERVICE OF SUMMONS BY MAIL

☐ I hereby certify that the attached receipt was received by me showing that the Summons and a copy of the Petition mailed to the Respondent identified on the first page of this Summons was accepted by the Respondent on the ____ day of _____, 20____.

☐ I hereby certify that the attached return receipt was received by me showing that the Summons and a copy of the petition was returned not accepted on the ____ day of _____, 20____.

☐ I hereby certify that the attached return receipt was received by me showing that the Summons and a copy of the Petition mailed to the Respondent identified on the first page of this Summons was accepted by _____ on behalf of the Respondent on the ____ day of _____, 20____.

Dated: _____

Clerk, _____ County

STATE OF INDIANA

IN THE _____ COURT

COUNTY OF _____

CAUSE NO. _____

IN RE THE MARRIAGE OF:

Petitioner,

v.

Respondent.

ORDER SETTING PROVISIONAL HEARING

A Verified Petition for Dissolution of Marriage and Request for Provisional Orders has been filed in this Court. The Court now sets this matter for a Provisional Hearing. The parties must be prepared to present evidence in support of their petition. Failure to appear may result in matters being decided in your absence.

IT IS SO ORDERED that this matter shall be heard on:

_____.

Dated: _____

Judicial Officer

☐ The Clerk shall serve this pleading upon _____
by certified mail at the following address (this requires an additional fee payable to the Clerk):

☐ The Clerk shall have this pleading served upon _____
by sheriff at the following address:

Distribution:

STATE OF INDIANA

IN THE _____ COURT

COUNTY OF _____

CAUSE NO. _____

IN RE THE MARRIAGE OF:

Petitioner,

v.

Respondent.

PROVISIONAL ORDER

Petitioner **appears/does not** appear and Respondent **appears/does not** appear for provisional hearing on _____. The Court having been duly advised in this matter now finds the following:

- | | | |
|--------------------------|------------|---|
| <input type="checkbox"/> | Petitioner | is awarded custody of the minor child(ren). |
| <input type="checkbox"/> | Respondent | |
| <input type="checkbox"/> | Petitioner | shall pay temporary child support for the minor child(ren) in the amount of \$_____ per week beginning on _____. |
| <input type="checkbox"/> | Respondent | All support payments shall be made through the County Clerk's Office (case payments only) or the State Central Collection Unit PO Box 7130, Indianapolis, Indiana 46220-7130 (any payments other than cash). The court shall issue and immediately activate Income Withholding Order pursuant to IC 31-16-15 to any employer or income provider to the child support Obligor. |
| <input type="checkbox"/> | Petitioner | shall be responsible for the first \$_____ of annual uninsured medical expenses for the minor child(ren). |
| <input type="checkbox"/> | Respondent | Thereafter, Petitioner shall be responsible for _____% and Respondent for _____ % of annual uninsured medical expenses for the minor child(ren). |
| <input type="checkbox"/> | Petitioner | shall have temporary parenting time with the minor child(ren) as the parties agree or according to the Indiana Parenting Time Guidelines. |
| <input type="checkbox"/> | Respondent | |
| <input type="checkbox"/> | Petitioner | shall have temporary possession of the marital residence. |
| <input type="checkbox"/> | Respondent | |

- ☐ Petitioner shall maintain medical, dental and optical insurance as
☐ Respondent available through employment, or Health Insurance
Marketplace, or by government provided insurance for the
following persons:

- ☐ Petitioner shall pay temporary spousal maintenance to the other party as
☐ Respondent follows:

There shall be a temporary division of debts as follows:

- ☐ Petitioner shall be responsible for the following debts:
☐ Respondent

- ☐ Petitioner shall be responsible for the following debts:
☐ Respondent

There shall be a temporary division of property, as follows:

- ☐ Petitioner shall have sole possession of the following items of
☐ Respondent property:

- ☐ Petitioner shall have sole possession of the following items of
☐ Respondent property:

There shall be a temporary division of motor vehicles, as follows:

☐ Petitioner shall have temporary possession of the following vehicles:

☐ Respondent _____
(Vehicle #1, Make, Model, and Year)

(Vehicle #2, Make, Model, and Year)

☐ Petitioner shall have temporary possession of the following vehicles:

☐ Respondent _____
(Vehicle #1, Make, Model, and Year)

(Vehicle #2, Make, Model, and Year)

There shall be a temporary restraining order in effect during these proceedings:

☐ Restraining the parties from removing the child(ren) from the state without the permission of the court or all parties;

☐ Restraining the parties from transferring, encumbering, or concealing, or in any way disposing of any of the property of the parties;

☐ Other:

ALL WHICH IS SO ORDERED _____

Judicial Officer

Distribution:

STATE OF INDIANA

IN THE _____ COURT

COUNTY OF _____

CAUSE NO. _____

IN RE THE MARRIAGE OF:

Petitioner,

v.

Respondent.

VERIFIED WAIVER OF FINAL HEARING

Come now Petitioner and Respondent pursuant to Indiana Code 31-15-2 and submit their Verified Waiver of Final Hearing. In support of this Waiver, the parties state that:

1. More than sixty (60) days have passed since the filing of Petitioner's Verified Petition for Dissolution of Marriage.
2. Both parties request the Court to approve their Settlement Agreement and Decree of Dissolution of Marriage.
3. Both parties voluntarily waive the opportunity to hold a final hearing on contested issues and have signed below before filing this document with the court.

I affirm under the penalties of perjury that the foregoing representations are true.

Petitioner

Respondent

Address:

IN THE _____ COURT

CAUSE NO. _____

Petitioner,

Respondent.

The parties having submitted a Settlement Agreement and the Court having seen and considered the Verified Petition of Dissolution of Marriage by the parties now approves the following:

2. _____ has been a continuous resident of _____ County for the last three months.

4. _____ is is pregnant.

Name

Date of Birth

It is in the best interest of the child(ren) that:

- ☐ The parties shall have joint legal custody over the minor child(ren) with Petitioner being the primary custodial parent.
- ☐ The parties shall have joint legal custody over the minor child(ren) with Respondent being the primary custodial parent.
- ☐ Petitioner shall have sole legal custody of the minor child(ren) and shall be the primary custodial parent.
- ☐ Respondent shall have sole legal custody of the minor child(ren) and shall be the primary custodial parent.
- ☐ Other, as described below:

7. Parenting Time

Parenting time with the minor child(ren) shall be as follows:

- ☐ Petitioner shall have parenting time with the minor child(ren), at a
- ☐ Respondent minimum, as set out by the Parenting Time Guidelines
- ☐ Other The parties agree that it is in the best interests of the minor child(ren) to follow a parenting time schedule that does NOT follow the Indiana Parenting Time Guidelines. Parenting time with the minor child(ren), shall be as follows:

8. **Child Support**

- ☐ Petitioner will pay child support in the amount of \$_____
- ☐ Respondent per week as shown by the attached child support worksheet, beginning on the first Friday following the date of the Decree. All support payments shall be made through the County Clerk's Office (cash payments only) or the State Central Collection Unity PO Box 7130, Indianapolis, Indiana 46207-7130 (any payments other than cash). The court shall issue an immediately activated Income Withholding Order pursuant to IC 31-16-15 to any employer or income provider of the child support Obligor.
- ☐ Petitioner shall be responsible for all controlled expenses related to
- ☐ Respondent the upbringing of the minor child(ren). (For use only in cases when parenting time is equally shared).
- ☐ Petitioner will be responsible for the first _____ of
- ☐ Respondent annual uninsured health and medical, dental, optical, hospital and prescription expenses for the minor child(ren). Thereafter, Petitioner shall be responsible for _____% of annual uninsured medical expenses for the minor child(ren), and Respondent shall be responsible for _____% of annual uninsured medical expenses for the minor child(ren).
- ☐ Petitioner will be responsible to pay a child support arrearage in the
- ☐ Respondent amount of \$_____ which has accrued during the pendency of this proceeding. Such arrearage shall be paid in the periodic amount of \$_____ per

week in addition to the current support rendered above,
until such arrearage has been satisfied.

9. Health insurance

The provisions for health insurance maintenance shall be as follows:

- ☐ Petitioner shall maintain medical, dental and optical insurance as
- ☐ Respondent available through employment, or Health Insurance Marketplace, or by government provided insurance for the minor child(ren).

- ☐ Other Health insurance is not available to either parent at a reasonable cost, therefore, neither party is ordered to provide health insurance at this time.
In the event that health insurance for the children becomes available at a reasonable cost to one or both of the parties, the party to whom such coverage is available shall obtain coverage for the children within a reasonable time after such coverage becomes available.

10. Taxes

The arrangement for claiming the tax credits, exemptions and deductions for the minor children shall be as follows:

- ☐ Petitioner shall be entitled to claim the minor child(ren) for federal,
- ☐ Respondent state, and local income tax purposes on an annual basis.
The parties shall cooperate to sign all necessary documents that will allow the party claiming the exemptions to do so.

- ☐ Other Petitioner and Respondent shall each be entitled to claim the minor child(ren) for federal, state, and local income tax purposes in alternating years.

Petitioner shall be entitled to claim the minor child(ren) in the year _____, and every _____ year thereafter.

Respondent shall be entitled to claim the minor child(ren) in the year _____, and every _____ year thereafter. The parties shall cooperate to sign all necessary documents that will allow the party claiming the exemption to do so.

11. Joint debt.

The division of jointly held debts shall be as follows:

- ☐ The parties have no outstanding debts for which they are responsible
- ☐ Petitioner will be solely responsible for the following debts and shall hold

Respondent harmless from liability, expenses, attorney's fees, and loss which may be incurred by Respondent arising out of Petitioner's failure to pay such debts.

Name of Creditor

Amount of Debt

_____	_____
_____	_____
_____	_____
_____	_____

- ☐ Respondent will be solely responsible for the following debts and shall hold Petitioner harmless from liability, expense, attorney's fees, and loss which may be incurred by Petitioner arising out of Respondent's failure to pay such debts.

Name of Creditor

Amount of Debt

_____	_____
_____	_____
_____	_____
_____	_____

12. **Individual debt.**

The individual debt division shall be as follows:

Debts held in Petitioner's name only:

☐ Petitioner shall be solely responsible for all debts held in **his/her** individual name, and all debts incurred by **him/her** in **his/her** name since the date of final separation.

Petitioner agrees to hold Respondent harmless from liability, expense, attorney's fees, and loss which may be incurred by Respondent, arising out of Petitioner's failure to pay such debts.

☐ Other:

Debts held in Respondent's name only:

☐ Respondent shall be solely responsible for all debts held in **his/her** individual name, and all debts incurred by **him/her** in **his/her** name since the date of final separation. Respondent agrees to hold Petitioner harmless from liability, expense, attorney's fees, and loss which may be incurred by Petitioner, arising out of Respondent's failure to pay such debts.

☐ Other:

13. **Vehicles**

The vehicle division shall be as follows:

- ☐ There are no vehicles to divide.
- ☐ Petitioner shall have possession of the following vehicle(s), and Respondent shall execute all documents necessary to transfer title of said vehicles within a reasonable time following the date of this Order:

(Vehicle #1, Make, Model and Year)

(Vehicle #2, Make, Model and Year)

- ☐ Respondent shall have possession of the following vehicle(s), and Petitioner shall execute all documents necessary to transfer title of said vehicles within a reasonable time following the date of this Order:

(Vehicle #1, Make, Model and Year)

(Vehicle #2, Make, Model and Year)

- ☐ All outstanding debts related to the above listed vehicles has been allocated in paragraph number 11 or 12 of this Decree.

14. **Personal property.**

The parties' personal property division shall be as follows:

- ☐ The parties have divided all items of personal property.
- ☐ Petitioner shall have sole possession of the following items of personal property:

☐ Respondent shall have sole possession of the following items of personal property:

15. Marital Residence.

The parties are owners of real estate located at:

- | | | |
|--------------------------|------------|---|
| <input type="checkbox"/> | Petitioner | shall retain or take possession and shall become the sole |
| <input type="checkbox"/> | Respondent | owner of said real estate. |
| <input type="checkbox"/> | Petitioner | Shall vacate the marital residence by: |
| <input type="checkbox"/> | Respondent | _____. |
| <input type="checkbox"/> | Petitioner | Shall be responsible for all payments related to property |
| <input type="checkbox"/> | Respondent | taxes and homeowners insurance and shall receive the deductions for mortgage interest and taxes. |
| <input type="checkbox"/> | Petitioner | Shall transfer, by Quitclaim Deed, his/her interest in said |
| <input type="checkbox"/> | Respondent | real estate to the party retaining possession of the marital residence by: |
| | | _____. |
| <input type="checkbox"/> | Petitioner | Agrees to refinance the mortgage debt related to the |
| <input type="checkbox"/> | Respondent | marital residence and make a good faith effort to obtain a release of the other party on said debt on the earliest possible date. Upon release of the other party from mortgage debt, the other party shall transfer, by Quitclaim Deed, his/her interest in said real estate. The party assuming responsibility for mortgage agrees to hold the other party harmless from liability, expense, attorney |

fees, loss or damages which may be a result of a failure to make payments on said mortgage debt.

☐ Other

The parties are jointly responsible on a lease for a residence located at:

_____, and the parties

agree that:

☐ Petitioner shall retain or take possession of the leased premises, be
☐ Respondent responsible for the remaining rental payment and fees due under said lease, and agrees to hold the other party harmless from all liability, expense, attorney fees, loss or damage which may be a result of the failure to make required payments under said lease.

☐ Petitioner Shall vacate the leased residence by _____.

☐ Respondent

☐ Other

16. Change of names.

☐ Petitioner would like the following former name restored and is not a lifetime sex or violent offender or Petitioner has complied with I.C. 31-15-2-19; Petitioner shall hereinafter be known as:

☐ Respondent would like the following former name restored and is not a lifetime sex or violent offender or Respondent has complied with I.C. 31-15-2-19; Respondent shall hereinafter be known as:

☐ Neither Petitioner nor Respondent requests a name change.

17. The marriage has suffered an irretrievable breakdown and should be dissolved.

18. The parties mutually represent and acknowledge that the division of property and payment of debts is fair and equitable and each is satisfied with such division.

I affirm under penalties of perjury that the foregoing representations are true.

Petitioner's signature

STATE OF INDIANA

COUNTY OF _____

Before me _____, a notary public _____
County, State of Indiana, personally appeared _____
and being duly sworn upon **his/her** oath, says that the facts alleged in the foregoing instrument are true.

Date _____

Notary Public _____

My Commission Expires _____

I affirm under penalties of perjury that the foregoing representations are true.

Respondent's signature

STATE OF INDIANA

COUNTY OF _____

Before me _____, a notary public _____
County, State of Indiana, personally appeared _____
and being duly sworn upon **his/her** oath, says that the facts alleged in the foregoing instrument are true.

Date _____

Notary Public _____

My Commission Expires _____

15. Findings of the Court

This document represents an agreement submitted by the parties for approval by the Court. The parties have submitted a waiver of final hearing and have agreed that the property distribution provisions of this agreement represent a just and reasonable division of the marital estate and debts. **IT IS THEREFORE ORDERED by the Court that the parties' marriage is hereby dissolved.**

Date: _____
Judicial Officer

Distribution:

Petitioner's Name and Mailing Address:	Respondent's Name and Mailing Address:
_____	_____
_____	_____
_____	_____
_____	_____