

In the interest of (*List children*):

- 1 Name: _____
- 2 Name: _____
- 3 Name: _____
- 4 Name: _____

§
§
§
§
§

Cause No:

[Empty box for Cause No.]

In the _____ District County Court of:

_____ County, Texas

PETITION IN SUIT AFFECTING THE PARENT-CHILD RELATIONSHIP

1. DISCOVERY LEVEL

Discovery should be conducted under Level 2 of Rule 190 of the Texas Rules of Civil Procedure. [Discovery is a procedure that can be used by parties in a lawsuit to find out information about the other party.]

2. PARTIES

Petitioner [You] --

I am the Petitioner.

My name is _____
[PRINT your full name]

I am _____ years old.

I live at _____ [address].

I am the children's [CHECK all that apply.]

mother. father. _____ .

I am not related to the children the subject of this suit.

3. STANDING

Petitioner has standing to bring this suit because Petitioner is: [CHECK one of the following.]

- a parent, guardian, conservator, or legal representative.
- an alleged father.
- a person who has had physical custody of the child for at least 6 months.
- a person who lived with the child and the parent, guardian, conservator or legal representative, and that person has died.
- the child's foster parent, and the child has lived with me for at least 6 months, and I have been approved to adopt the child.
- the child's foster parent, and the child has lived with me for at least 12 months.

4. JURISDICTION [CHECK one]

- No court has jurisdiction of the children. They have never been part of any other case.
- The children in this case were included in a case before a different court, but this court has jurisdiction, now. The case has been transferred to this Court.
- I do not believe any other court has jurisdiction over this case. I will ask the Bureau of Vital Statistics to tell me if the children have been part of another case before a different court.
- This Court made prior orders about another child born to these same parents. This case should be filed in the same docket number as the prior case.

5. CHILDREN

The following children are the subject of this suit.

	<u>Child's name</u>	<u>Sex</u>	<u>Date of Birth</u>	<u>Place of Birth</u>	<u>Current Address</u>
1	_____	_____	_____	_____	_____
2	_____	_____	_____	_____	_____
3	_____	_____	_____	_____	_____
4	_____	_____	_____	_____	_____
5	_____	_____	_____	_____	_____
6	_____	_____	_____	_____	_____

6. INFORMATION REQUIRED BY SECTION 152.209, TEXAS FAMILY CODE
[CHECK only one.]

- Each party lives in Texas.
- At least one party does not live in Texas. An affidavit regarding information required by Section 152.209 of the Texas Family Code is attached to this answer in **Exhibit Out-of-State Parent Affidavit.**

7. PERSONS ENTITLED TO CITATION

Respondent A:

Respondent's name is _____.
[PRINT Respondent's full name]

Respondent is _____ years old.

Respondent lives at _____
[address].

Respondent is the children's [CHOOSE ONE]

mother. father. _____.

Legal Notice to Respondent A:

No Service of Process Needed At This Time: Please do not have a sheriff or constable give a copy of this Original Petition in Suit Affecting the Parent-Child Relationship to the Respondent right now because Respondent may sign a Waiver of Service or voluntarily file an Answer. *[You are saying that the Respondent may sign a paper, in front of a notary, agreeing that you have given him or her a FILE-STAMPED copy of this Original Petition in Suit Affecting the Parent-Child Relationship, and s/he does not want to have a sheriff, constable, or private process server give him or her another copy of this Original Petition in Suit Affecting the Parent-Child Relationship.]*

If the Respondent does not sign a Waiver of Service or file an Answer, I will ask a sheriff or constable to give a copy of this Original Petition in Suit Affecting the Parent-Child Relationship to the Respondent at this address:

[PRINT street address, city, state, and zip code where a copy of this petition can be delivered to the Respondent by law enforcement.]

[If this is a work address, list the business name.] _____.

OR

Service of Process is requested: Please have a sheriff or constable give a copy of this Original Petition in Suit Affecting the Parent-Child Relationship to the Respondent at this address:

[PRINT street address, city, state, and zip code where a copy of this petition can be delivered to the Respondent by law enforcement.]

[If this is a work address, list the business name.] _____.

OR

Citation by publication or other substituted service is necessary for the reasons stated in the attached affidavit. *[ATTACH Affidavit for Citation by Publication or Substituted Service.]*

Respondent B: Check this box if there is no Respondent B, and skip to the next page.
Respondent's name is _____.
[PRINT your Respondent's full name]

Respondent is _____ years old.

Respondent lives at _____
[address].

Respondent is the children's [CHOOSE ONE]

mother. father. _____ .

Legal Notice to Respondent B:

No Service of Process Needed At This Time: Please do not have a sheriff or constable give a copy of this Original Petition in Suit Affecting the Parent-Child Relationship to the Respondent right now because Respondent may sign a Waiver of Service or voluntarily file an Answer. [You are saying that the Respondent may sign a paper, in front of a notary, agreeing that you have given him or her a FILE-STAMPED copy of this Original Petition in Suit Affecting the Parent-Child Relationship, and s/he does not want to have a sheriff, constable, or private process server give him or her another copy of this Original Petition in Suit Affecting the Parent-Child Relationship.]

If the Respondent does not sign a Waiver of Service or file an Answer, I will ask a sheriff or constable to give a copy of this Original Petition in Suit Affecting the Parent-Child Relationship to the Respondent at this address:

[PRINT street address, city, state, and zip code where a copy of this petition can be delivered to the Respondent by law enforcement.]

[If this is a work address, list the business name. _____.]

OR

Service of Process is requested: Please have a sheriff or constable give a copy of this Original Petition in Suit Affecting the Parent-Child Relationship to the Respondent at this address:

[PRINT street address, city, state, and zip code where a copy of this petition can be delivered to the Respondent by law enforcement.]

[If this is a work address, list the business name] _____.

OR

Citation by publication or other substituted service is necessary for the reasons stated in the attached affidavit. [ATTACH Affidavit for Citation by Publication or Substituted Service.]

Respondent C: Check this box if there is no Respondent C, and skip to the next page.
Respondent's name is _____.
[PRINT your Respondent's full name]

Respondent is _____ years old.

Respondent lives at _____
[address].

Respondent is the children's [CHOOSE ONE]
 mother. father. _____.

Legal Notice to Respondent C:

No Service of Process Needed At This Time: Please do not have a sheriff or constable give a copy of this Original Petition in Suit Affecting the Parent-Child Relationship to the Respondent right now because Respondent may sign a Waiver of Service or voluntarily file an Answer. *[You are saying that the Respondent may sign a paper, in front of a notary, agreeing that you have given him or her a FILE-STAMPED copy of this Original Petition in Suit Affecting the Parent-Child Relationship, and s/he does not want to have a sheriff, constable, or private process server give him or her another copy of this Original Petition in Suit Affecting the Parent-Child Relationship.]*

If the Respondent does not sign a Waiver of Service or file an Answer, I will ask a sheriff or constable to give a copy of this Original Petition in Suit Affecting the Parent-Child Relationship to the Respondent at this address:

[PRINT street address, city, state, and zip code where a copy of this petition can be delivered to the Respondent by law enforcement.]

[If this is a work address, list the business name.] _____.

OR

Service of Process is requested: Please have a sheriff or constable give a copy of this Original Petition in Suit Affecting the Parent-Child Relationship to the Respondent at this address:

[PRINT street address, city, state, and zip code where a copy of this petition can be delivered to the Respondent by law enforcement.]

[If this is a work address, list the business name.] _____.

OR

Citation by publication or other substituted service is necessary for the reasons stated in the attached affidavit. *[ATTACH Affidavit for Citation by Publication or Substituted Service.]*

8. NONRESIDENT ENTITLED TO CITATION

[Complete this section if Respondent does not live in Texas. Check all that apply.]

_____ named above, is not a Texas resident.

[PRINT the nonresident's name.]

- The children of this case live in Texas because of the nonresident's actions.
- The nonresident has lived in Texas with the children.
- The nonresident has lived in Texas and provided prenatal expenses or support for the children.
- The nonresident had sexual intercourse in Texas, and the children may have been conceived by that act of intercourse.
- The nonresident was personally served with citation in Texas.
- The nonresident submitted to Texas jurisdiction by consent, by entering a general appearance, or by filing a responsive document which waived any contest to personal jurisdiction.
- The nonresident registered with the paternity registry maintained by the Bureau of Vital Statistics as provided by Chapter 160 of the Texas Family Code.
- The nonresident person signed an acknowledgment or denial of paternity filed with the bureau of vital statistics, and this suit seeks to challenge the acknowledgment or denial.

9. CHILDREN'S HEALTH INSURANCE. [Check any of the following that apply.]

The children do do not have private health insurance in effect.

Private Health Insurance is in effect: *(Complete, if the children have private health insurance.)*

Name of insurance company: _____

Policy number: _____

Cost of premium: \$ _____

Name of person who pays for insurance: _____

The insurance policy is is not available through the parent's work.

Private Health Insurance NOT in effect: *(Complete, if the children do NOT have private health insurance.)*

The children do do not receive medical assistance through CHIPS or Medicaid.

Cost of premium (if any): \$ _____

Health insurance is is not available to the person who pays child support at a reasonable cost.

10. CHILDREN'S PROPERTY [CHECK ONE.]

The children do not own any significant property.

The children own the property listed below:

[DESCRIBE] _____

11. CONSERVATORSHIP & ACCESS [CUSTODY & VISITATION]

The children's best interest will be served by naming Petitioner: [CHECK only one.]

- Joint Managing Conservator, with the exclusive right to establish the children's primary residence, (Home-Parent),
- Joint Managing Conservator, noncustodial parent, (Co-Parent)
- Sole Managing Conservator, (Home-Parent)
- Possessory Conservator, (Co-Parent)

and naming **Respondent A** : [CHECK only one.]

- Joint Managing Conservator, with the exclusive right to establish the children's primary residence, (Home-Parent).
- Joint Managing Conservator, noncustodial parent, (Co-Parent).
- Sole Managing Conservator, (Home-Parent).
- Possessory Conservator (Co-Parent).

and naming **Respondent B** : [CHECK only one.]

- Joint Managing Conservator, with the exclusive right to establish the children's primary residence, (Home-Parent).
- Joint Managing Conservator, noncustodial parent, (Co-Parent).
- Sole Managing Conservator, (Home-Parent).
- Possessory Conservator (Co-Parent).

and naming **Respondent C** : [CHECK only one.]

- Joint Managing Conservator, with the exclusive right to establish the children's primary residence, (Home-Parent).
- Joint Managing Conservator, noncustodial parent, (Co-Parent).
- Sole Managing Conservator, (Home-Parent).
- Possessory Conservator (Co-Parent).

[CHECK all that apply.]

The residence of the children should be restricted to the following geographical area:

Respondent has committed family violence during the two-year period before I filed this case. I ask the Court to keep Respondent away from the children. But if the Court will not deny Respondent visitation, I ask that the Court order that Respondent's visitation be supervised in the following way:

I ask the Court to order Respondent to stop drinking alcohol or using a controlled substance within the twelve hours before or during the period of access to the children.

A protective order was rendered under chapter 85 of title 4 of the Texas Family Code against Respondent during the two-year period before I filed this suit. I ask the Court to deny Respondent access to the children. Alternatively, if the Court will not deny Respondent visitation, I ask that the Court order that Respondent's access be supervised in the following manner:

12. SUPPORT [CHECK one.]

I ask the Court to order Respondent to pay child support and medical support for the children in this case.

_____, an **adult child** in this case is disabled.
[PRINT the adult child's name.]

Needing substantial care and supervision, this child will not be able to live independently. The disability existed or its cause was known to exist before or on the child's eighteenth birthday. I ask the Court to make orders for this child's financial and medical support.

_____, a **minor child** in this case is disabled.
[PRINT the child's name.]

Needing substantial care and supervision, this child will not be able to live independently, even as an adult. I ask the Court to make orders for this child's financial and medical support that will continue after the child's 18th birthday.

_____, a child in this case, is enrolled
[PRINT the child's name.]

in an accredited secondary school program leading toward a high school diploma and is

maintaining the minimum attendance requirements of subchapter C of chapter 25 of the Education Code and the school. I ask the Court to order that payments for the support of this child be continued until the end of the month when the child graduates from high school.

13. TEMPORARY RESTRAINING ORDER AND TEMPORARY INJUNCTION

[Check this box only if you are asking the court to issue a Temporary Restraining Order or a Temporary Injunction.]

I ask the court to grant a Temporary Restraining Order and, after notice and hearing, a Temporary Injunction which would restrain Respondent from:

Disturbing the peace of the children or another party.

Withdrawing the children from the school or day-care where they are enrolled.

Hiding the children from Petitioner.

Talking badly about Petitioner or Petitioner's family to, or around, the children.

Drinking alcohol or consuming controlled substances within 12 hours before or during a period of possession or access to the children.

Canceling, changing, failing to pay premiums, or disturbing the present level of health insurance coverage for the children.

14. PRAYER [Requests]

Petitioner asks that citation and notice issue as required by law and that the Court enter its orders in accordance with the allegations contained in this petition.

Petitioner asks for general relief.

_____ [Sign your name.]

[PRINT your name and information.]:

Name: _____ Telephone: _____

Mailing Address: _____