SAINT REGIS MOHAWK TRIBAL COURTS IN AND FOR THE SAINT REGIS MOHAWK TRIBE

In re	parenting and support of:	
Chil	dren:	Case No.
Petitioner:		PETITION FOR CHILD CUSTODY, VISITATION SCHEDULE/PARENTING PLAN, AND/OR CHILD SUPPORT CONTESTED
and Resp	oondent:	□ UNCONTESTED
1.	CAUSE OF ACTION. This action is brought pursuant to the Sain Code by (name): I ask the Court to approve a (check all that	
2.	over the parents because (check all that ap The Petitioner: is an enrolled member of the Saint Reg resides within the territory of Akwesas The Respondent: is an enrolled member of the Saint Reg resides within the territory of Akwesas The children involved in this case: are enrolled members or are eligible to are Indian children who reside or are defined.	as personal jurisdiction (authority to make decisions) oply): gis Mohawk Tribe. gis Mohawk Tribe. sne. be enrolled members of the Saint Regis Mohawk Tribe. lomiciled on the territory of Akwesasne. of the Saint Regis Mohawk Tribe or in a care facility lian children.

3.	CHILDREN.					
	Respondent, (nan following children	ne):		, and I are parents of the		
	Tonowing emidien	1.				
	Child's Name	Date of Birth	Current Residence	Enrollment (if applicable)		
1			Resides with/Resides at:	Enrollment #:		
1.			D '1 '4/D '1	Enrollment #:		
2.			Resides with/Resides at:	Enrollment #:		
			Resides with/Resides at:	Enrollment #:		
3.			Resides with Resides at.	Emonment //.		
			Resides with/Resides at:	Enrollment #:		
4.						
			Resides with/Resides at:	Enrollment #:		
5.						
١.	PARENTAGE.					
		on for each child as				
	<u> </u>	ldren listed in Section				
		this action, (name):		, is:		
	☐ Mothe	r				
	☐ Father					
	☐ the children's Acknowledged Father, who signed an <i>Acknowledgement of Paterna</i> and filed it with:					
		u wuu.] Saint Regis Mohay	wk Tribal Court on (date):	and/or		
		Other agency:	wk I Hour Court on (unic).	on (date):		
			nowledgement of Paternity			
				court order entered on (date):		
		·	•			
		A copy of the <i>Ord</i>	er on Petition for Establish	ment of Paternity is attached .		
	The Respondent	in this action <i>(name</i>	e):	, is:		
	☐ Mothe)·	, 13.		
	\square Father					
	☐ the chi	ildren's Acknowleds	ged Father, who signed an	Acknowledgement of Paternity		
	and filed	it with:				
		Saint Regis Mohav	wk Tribal Court on (date):	and/or		
		Other agency:		on (date):		
		A copy of the Ack	nowledgement of Paternity	is <u>attached</u> .		
	☐ the ch	ildren's Adjudicated	d Father, as determined by	court order entered on (date)		
		 A conv of the Ord	er on Petition for Fstablish	ument of Paternity is attached.		
	L	1 11 copy of the Ora	er on i ennon jor Establish	mem of I wermy is accarded.		

5.	CHILDREN'S HOME(S). During the last five (5) years, the children have lived (check the box that applies): in no place other than the territory of Akwesasne and with no person other than the Petitioner(s) or Respondent(s) in the following places with the following persons (list each place the child lived, including the territory of Akwesasne, the dates the child lived there, and the names of the person with whom the child lived. Use additional pages if necessary):				
	Child's Name	Place	Dates	Name of Person	
1.					
2.					
3.					
4.					
5.					
7.	□ Does <u>not</u> apply. (<i>skip to Secti</i> □ I ask the Court to approve my for limiting one or both parents' □ I ask the Court to give no visi visitation apply and are severe en □ Willful Abandonme abandoned the children refused to perform his/ho □ Child Abuse – (Pare in that parent's home) at □ physical □ sexual □ a pattern of e □ Domestic Violence (or someone living in that an assault or sexual assault or sexual assault or sexual assault	y proposed <i>Parenting</i> visitation. My proposed tation to Respondent nough to justify no visitation to justify no visitation to grant – (<i>Parent's name</i>) listed in Section 2 for parenting functions tent's name):	sed Parenting Plans because the follow sitation (check at l : for an extended ti s of the children lis use was (check all t's name): s a history of acts	ris attached. ring reasons for limiting reast one reason): willfully me or has substantially ted in Section 2 (or someone living that apply): of domestic violence or	
7.	CLAIMS TO CUSTODY OR V (Check the box that applies): ☐ I do not know of any person o or claim to have custody or visita ☐ The following persons have visitation rights to the children (additional pages if necessary):	ther than a named par ation rights of the chile physical custody of	ldren. the children or cl	aim to have custody or	

Child's			
1.			
2.			
3.			
3.			
\square I have been involved	ies): blved in any other proced in the following proced	eeding regarding the cedings involving the	children. children <i>(list the Cou</i> n
case number, and the da Child's Name	te of the judgement or o	order. Use additional Case #	pages if necessary): Date
Cinu s Ivanic	Court	Case #	Date
(check the box that appl. \Box I do not know of any	other legal proceeding		
☐ I do not know of any ☐ I know of the follow concerned, the Court, co	other legal proceeding ing legal proceedings was use number, and type of	which concern the chile proceeding):	dren (list the child
☐ I do not know of any☐ I know of the follow	other legal proceeding ing legal proceedings w	which concern the chil	
☐ I do not know of any ☐ I know of the follow concerned, the Court, co	other legal proceeding ing legal proceedings was use number, and type of	which concern the chile proceeding):	dren (list the child
☐ I do not know of any ☐ I know of the follow concerned, the Court, co	other legal proceeding ing legal proceedings was use number, and type of	which concern the chile proceeding):	dren (list the child
☐ I do not know of any ☐ I know of the follow concerned, the Court, co	other legal proceeding ing legal proceedings was use number, and type of	which concern the chile proceeding):	dren (list the child
☐ I do not know of any ☐ I know of the follow concerned, the Court, co	other legal proceeding ing legal proceedings was number, and type of Court	which concern the chilfproceeding): Case #	dren (list the child
☐ I do not know of any ☐ I know of the follow concerned, the Court, co Child's Name CHILD SUPPORT, IN Support. I ask the Cour	cother legal proceeding ing legal proceedings was number, and type of Court SURANCE, AND TA	which concern the chilfproceeding): Case # XES.	dren (list the child
☐ I do not know of any ☐ I know of the follow concerned, the Court, co Child's Name CHILD SUPPORT, IN Support. I ask the Cour (check all that apply) ☐ Pay child su Support Enforce	cother legal proceeding ing legal proceedings was number, and type of Court SURANCE, AND TA	which concern the child proceeding): Case # XES. Int, Vorksheet is attached	Proceeding Ty Proceeding Ty to My completed SRMT (Check "Clerk action
☐ I do not know of any ☐ I know of the follow concerned, the Court, co Child's Name CHILD SUPPORT, IN Support. I ask the Cour (check all that apply) ☐ Pay child su Support Enforce required" box in for a Child Supp	cother legal proceedings was enumber, and type of Court SURANCE, AND TA to order the Responde poort according to the Imment Unit Obligation was the header on the first poort Order.)	XES. nt, Variable Support Act. Norksheet is attached to page of this Petition	Proceeding Ty Proceeding Ty to My completed SRMT (Check "Clerk action
☐ I do not know of any ☐ I know of the follow concerned, the Court, co Child's Name CHILD SUPPORT, IN Support. I ask the Cour (check all that apply) ☐ Pay child su Support Enforce required" box in for a Child Supp ☐ Provide and	cother legal proceedings was enumber, and type of Court SURANCE, AND TA to order the Responde poort according to the lement Unit Obligation was the header on the first poort Order.) keep health insurance to	which concern the child proceeding): Case # XES. The proceeding of this Petition for the children.	Proceeding Ty Proceeding Ty , to My completed SRMT of the Complete strip if you are asking the complete strip in
☐ I do not know of any ☐ I know of the follow concerned, the Court, co Child's Name CHILD SUPPORT, IN Support. I ask the Cour (check all that apply) ☐ Pay child su Support Enforce required" box in for a Child Supp ☐ Provide and ☐ Pay the child	cother legal proceedings was enumber, and type of Court SURANCE, AND TA to order the Responde poort according to the Imment Unit Obligation was the header on the first poort Order.)	XES. nt, Variable of this Petition For the children. red medical, or other expressions.	Proceeding Ty Proceeding Ty , to My completed SRMT of the Complete strip if you are asking the complete strip in
☐ I do not know of any ☐ I know of the follow concerned, the Court, co ☐ Child's Name ☐ CHILD SUPPORT, IN Support. I ask the Cour (check all that apply) ☐ Pay child su Support Enforce required" box in for a Child Supp ☐ Provide and ☐ Pay the child ☐ No request results.	cother legal proceedings was enumber, and type of Court SURANCE, AND TA to order the Responde pport according to the lement Unit Obligation was the header on the first port Order.) keep health insurance the dren's day care, uninsurance for support of children's day car	XES. nt, Variable of this Petition For the children. red medical, or other expressions.	Proceeding Ty Proceeding Ty , to My completed SRMT of the Complete strip if you are asking the complete strip in
☐ I do not know of any ☐ I know of the follow concerned, the Court, co Child's Name CHILD SUPPORT, IN Support. I ask the Cour (check all that apply) ☐ Pay child su Support Enforce required" box in for a Child Supp ☐ Provide and ☐ Pay the child	Court SURANCE, AND TA It to order the Responde The header on the first ort Order.) keep health insurance to dren's day care, uninsurance for support of chiller to order: In the children as dependent of the children as dependent.	Case # XES. This is a second of the children. The children.	Proceeding Ty

PETITION FOR CHILD CUSTODY, RES. SCHDEULE/PARENTING PLAN, AND/OR CHILD SUPPORT – Page 4 of 6

11.	REIMBURSEMENT.					
	(check all that apply):					
	\square Does <u>not</u> apply. (skip to Section 12)					
	☐ (name): is entitled to reimbursement for:					
	☐ Support or Assistance provided to the children.					
	 □ Expenses incurred on behalf of the children. □ Child Support Arrears (if this box is checked, check only one of the boxes below.) 					
			• •	,		
	☐ An additional 20% of current order should be ordered to be applied toward the liquidation of any overdue support.					
	1	1.1	order, up to 10% of the NO	P's gross income		
			stodial parent, Tribal Cour			
12.	FEES AND COSTS.					
	(check one):					
	\square Does not apply. (skip to	,				
	☐ I ask the Court to order t	he Respondent to pay	lawyer fees, guardian ad lit	tem fees, court costs,		
	and other reasonable fees.					
13.	OTHER REQUESTS					
10.	(check one):					
	☐ Does not apply					
	☐ I ask the Court to order	(specify):				
Petitio	oner fills out below:					
		DECLARATI	ION:			
I doolo	re under penalty of perjury un	DECLARAT		at I am the Detitioner		
	action, that I have made the					
	edge, and therefore, believe the		ied in this petition based	upon my mst nand		
		·				
Signati	ire of Petitioner	Print Name		Date		
I agre	e to accept legal papers for t	this case at (check on	re):			
0	☐ My lawyer's address, lis	· ·	,			
	☐ The following address (be your home address):			
	street address or PO box	city	state/province	zip/postal code		
	email address (optional):					
	If this address changes before	ore the case ends, vo	u must notify all parties a	nd a Court Clerk in		
	writing.	•				

Petitioner's lawyer (if any) fills out below: Signature of Lawyer Print Name Date Lawyer's street address or PO box zip/postal code city state/province Lawyer's email address (if applicable) Other Petitioner (if any) fills out below: I declare under penalty of perjury under the laws of the Saint Regis Mohawk Tribe that I am the Petitioner in this action, that I have made the allegations contained in this petition based upon my first-hand knowledge, and therefore, believe that they are true. Signature of Other Petitioner Print Name Date **Notary** Date: Location: I verify that the above named person signed this petition before me on this ____ day of _____, 20__. Commission Number: Commission Expires:

Notary Public Signature: _____