

IN THE WINNEBAGO TRIBAL COURT

\_\_\_\_\_, ) CASE # \_\_\_\_\_  
 )  
 Petitioner, )  
 )  
 vs. ) **APPLICATION FOR PATERNITY,**  
 ) **CUSTODY, VISITATION,**  
 \_\_\_\_\_, ) **AND SUPPORT**  
 )  
 Respondent, )

COMES NOW \_\_\_\_\_, Petitioner, and states to the Court as follows:

1) My current address is: \_\_\_\_\_, and I have resided there since \_\_\_\_\_. Petitioner is a member of the \_\_\_\_\_.

2) Respondent's current address is \_\_\_\_\_ and has resided there since \_\_\_\_\_. Respondent is a member of the \_\_\_\_\_.

3) There are \_\_\_\_\_ children born to myself and Respondent, namely:

<i>Child</i>	<i>Date of Birth</i>
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Child(ren)'s Maternal Grandparent's Name: \_\_\_\_\_  
Maternal Grandparent's Address: \_\_\_\_\_

Child(ren)'s Paternal Grandparent's Name: \_\_\_\_\_  
Paternal Grandparent's Address: \_\_\_\_\_

4) There ( ) is ( ) is not a court order naming Petitioner or Respondent the biological father of the above children. If so, list the name, case number, and date of that court order: \_\_\_\_\_.

5) Current physical possession of the children is with ( ) Petitioner ( ) Respondent ( ) Other: \_\_\_\_\_.

6) I believe it is in the best interest of the children for legal custody to be ( ) with Petitioner. ( ) with Respondent. ( ) joint between Petitioner and Respondent.

7) I believe the non-custodial parent should have ( ) reasonable unsupervised visitation. ( ) supervised visitation because \_\_\_\_\_.

8) I ( ) am ( ) am not requesting a temporary order, to be decided after notice to the other side, about 30-60 days from filing the petition of custody, visitation, and support to be entered prior to the final hearing because \_\_\_\_\_  
\_\_\_\_\_.

9) I believe an emergency order ( ) is ( ) is not immediately necessary. The following are reasons why an immediate emergency order is necessary: \_\_\_\_\_  
\_\_\_\_\_.

10) There ( ) is ( ) is not currently an order establishing child support for the above children. If so, list the name, case number, monthly amount of support, and date of that court order: \_\_\_\_\_.

11) I ( ) am ( ) am not currently receiving governmental assistance such as TANF for the minor children. If so, list when your assistance began: \_\_\_\_\_.

12) There ( ) are ( ) are not currently other cases or court orders regarding the minor children in another court. If so, list the name, case number, and date of those cases or court orders: \_\_\_\_\_.

13) The following facts support this Application for Paternity, Custody, Visitation, and Support: \_\_\_\_\_  
\_\_\_\_\_.

14) I ( ) do ( ) do not have additional children living with me. If so, list their names and dates of birth: \_\_\_\_\_.

15) I ( ) am ( ) am not required to register as a sex offender. I hereby give consent to the Court to use the information from the background check in considering this or any future application. However, I do ask that the court limit their use of this information to the application only.

WHEREFORE, Petitioner prays this Court enter an Order establishing paternity, custody, visitation, and support for the above children.

I swear under penalty of perjury, punishable by up to one year in jail and a \$5000.00 fine, that the above statements are true to the best of my knowledge and ability.

\_\_\_\_\_  
PETITIONER Date \_\_\_\_\_

SUBSCRIBED TO and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

CLERK'S USE ONLY: Fee paid, receipt # \_\_\_\_\_ IFP granted \_\_\_\_\_ Date \_\_\_\_\_

# CHILD AND FAMILY SERVICES

P.O. BOX 723 WINNEBAGO, NEBRASKA 68071  
PHONE 402-676-2378 FAX 402-676-2228

## WINNEBAGO TRIBE of NEBRASKA



### RELEASE OF INFORMATION

DATE: \_\_\_\_\_

By signing this document, I am granting Human Services permission to do a Law Enforcement Check, Central Registry Check, NDEN(Nebraska) and Sex Offenders check concerning myself.

This authorization is effective for thirty days from the date signed above.

\_\_\_\_\_

Print Name(include maiden name) \_\_\_\_\_

Street and P.O. Box Address/City/ State \_\_\_\_\_

Telephone(Home) \_\_\_\_\_ Work \_\_\_\_\_

Social Security Number \_\_\_\_\_ Birthdate \_\_\_\_/\_\_\_\_/\_\_\_\_

Please list the other states and address that you have resided in:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list three references, addresses and telephone number:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Participant signature: \_\_\_\_\_ Date: \_\_\_\_\_