



2. The **Petitioner**, \_\_\_\_\_, resides at  
*Full Name*

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*Address* *City* *State* *Zip*

and has lived there for (Check appropriate box)  at least six months  less than six months.

3. The **Respondent**, \_\_\_\_\_, resides at  
*Full Name*

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*Address* *City* *State* *Zip*

and has lived there for (Check appropriate box)  at least six months  less than six months.

4. The parties were married by  ceremonial marriage  common law marriage on or about the date of: \_\_\_\_\_ at \_\_\_\_\_  
*(location where marriage license is filed or where parties began living together)*

5. Of the marriage \_\_\_\_\_ child(ren) has/have been born, as follows:

NAME	DATE OF BIRTH
_____	_____
_____	_____
_____	_____
_____	_____

6. That the  petitioner  respondent **is** the father of said child(ren).  
*(Check box, if appropriate)*

However, the  petitioner  respondent **is not** the father of:  
 \_\_\_\_\_.

7. That the  petitioner  respondent (Check appropriate box)

is not pregnant at this time.

is pregnant and the birth of the child is expected on or about \_\_\_\_\_, 20\_\_\_\_. The father of said child is \_\_\_\_\_.

8. The petitioner alleges the marriage is irretrievably broken because there is serious marital discord adversely affecting the attitude of one or both of the parties toward the marriage, and there is no reasonable prospect of reconciliation.

9. During the period of the marriage the parties: *(Check appropriate box, attach paper as needed)*

- have not accumulated any land, buildings or other personal property that should be divided by the Court.
- acquired the following interests in land and/or buildings (real property) which should be divided by the court (attach all deeds, MHO agreements, or other evidence of land ownership).

LAND DESCRIPTION	ADDRESS	TRUST LAND (Yes or No)

acquired the following personal property (property other than land) during the period of their marriage, which is jointly held by both parties, which should be divided as follows:

PETITIONER TO BE AWARDED:

RESPONDENT TO BE AWARDED:

_____	_____
_____	_____
_____	_____

10. During the period of the marriage the parties, they have:*(Check appropriate box, attach paper as needed)*

- not incurred any indebtedness, loans, bills or unpaid accounts that need to be addressed by the Court.
- incurred the following indebtedness, loans, bills, or unpaid accounts and the

responsibility for the payment of this indebtedness should be addressed by the Court as follows:

PETITIONER TO PAY:  
(account and amount owed)

RESPONDENT TO PAY:  
(account and amount owed)

_____	_____
_____	_____
_____	_____

(attach all notes, finance agreements, bills, statements, etc. or other evidence of indebtedness)

11. The  petitioner and/or  respondent is a fit and proper person to have custody of the minor child(ren) of the parties and that custody of the child(ren) should be awarded to the  petitioner or the  respondent or  jointly to both parties.

12. The petitioner states that: *(Check appropriate box)*

the petitioner requests that the respondent be given custody of the minor child(ren), but that the petitioner be permitted to visit with said child(ren) at reasonable times and places as determined by the court according to the following schedule: every other weekend from 6:00 p.m. on Fridays to 6:00 p.m. on Sundays (standard visitation schedule).

the respondent should have the right to visit with said child(ren) at reasonable times and places as determined by the court, according to the following schedule: every other weekend from 6:00 p.m. on Fridays to 6:00 p.m. on Sundays (standard visitation schedule).

an alternate visitation schedule described below should be adopted by the Court to permit the  petitioner or  defendant to visit the minor child(ren):

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the respondent should not be permitted visitation because it is not in the best interests of the child(ren) because of the following reasons: (please explain, attach paper if needed)

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13. The  petitioner or  respondent is a healthy adult and should be ordered and directed to make regular periodic payments of child support for the maintenance and support of the child(ren) of the parties listed above until the child(ren) reaches the age of 18, or if the child(ren) is still in school, until the child(ren) reaches the age of 20 whichever comes first, or until further order of this Court.

14.  The petitioner  the respondent should be restored to her maiden name/former name as follows: \_\_\_\_\_

15. *(Check appropriate box)*

The respondent is a healthy adult and should be ordered and directed to make regular periodic payments for the maintenance and support of the petitioner in the amount of \$\_\_\_\_\_ per month until the petitioner remarries or until further order of the Court.

The petitioner agrees to pay the respondent \$\_\_\_\_\_per month for the maintenance and support of the respondent until the respondent remarries or until further order of the Court.

the petitioner waives any right to spousal maintenance or support from the respondent.

16. Petitioner certifies to the court that: *(Check appropriate box)*

no other divorce action has been filed by either the petitioner or respondent in any other state or tribal court as of the date of the filing of this petition.

another divorce action was previously filed in the following court:

\_\_\_\_\_, and the file number of that divorce action is as follows: \_\_\_\_\_.

The case is currently:  pending  closed. *(Check appropriate box)*

**WHEREFORE**, premises considered, petitioner prays that upon hearing this cause, the Court grant and award the petitioner a decree of divorce from the respondent and all of the relief requested herein and such other and further relief as to which the petitioner may be entitled.

\_\_\_\_\_  
Petitioner's signature

\_\_\_\_\_  
Petitioner's mailing address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone number

\_\_\_\_\_  
Email Address

**VERIFICATION**

I, \_\_\_\_\_, petitioner herein, being duly sworn to tell the truth and being of lawful age above 18 years of age, hereby state that I have prepared and read the attached petition and verify that all of the factual allegations contained in the petition are in fact true and correct to the best of my knowledge and belief, **UNDER PENALTY OF PERJURY.**

\_\_\_\_\_  
Petitioner

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_.

(SEAL)

\_\_\_\_\_  
Court Clerk / Deputy Clerk

**ACKNOWLEDGMENT OF NEED TO CONSULT AN ATTORNEY, COURT RULES  
AND SEMINOLE NATION CODE OF LAWS.**

I, \_\_\_\_\_, petitioner herein, acknowledge that I am aware that an attorney should be consulted about procedure, legal rights, and advice in connection with this proceeding and my failure to hire an attorney to represent me in this case may result in the loss of or waiver of important legal rights that I may have. I understand that Article XVI of the Constitution of the Seminole Nation and the provisions of the Seminole Nation Code of Laws govern the procedures in the court and that I should review and consult the constitution and code of laws and become familiar with these provisions in order to properly handle my case.

\_\_\_\_\_  
Petitioner

**CERTIFICATION**

I, \_\_\_\_\_, Court Clerk / Deputy Clerk, certify that the petitioner, \_\_\_\_\_, personally appeared before me on \_\_\_\_\_, 20\_\_\_\_, and being duly sworn, executed the above acknowledgment in my presence.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Court Clerk / Deputy Clerk

**CONTACT SHEET**

**PETITIONER:**

Name: \_\_\_\_\_ Veteran?  Yes  No If yes, please provide  
Veteran ID card

Physical Address: \_\_\_\_\_  
*City State Zip*

Mailing Address: \_\_\_\_\_  
*City State Zip*

Phone #: \_\_\_\_\_ Message#: \_\_\_\_\_

Native American  Non-Indian D.O.B. \_\_\_\_\_ SSN: \_\_\_\_\_

Place Of Employment: \_\_\_\_\_

Job Title: \_\_\_\_\_ Phone# \_\_\_\_\_ Shift: \_\_\_\_\_

Work Address: \_\_\_\_\_

Updates (address, phone number, etc): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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**RESPONDENT:**

Name: \_\_\_\_\_

Physical Address: \_\_\_\_\_  
*City State Zip*

Mailing Address: \_\_\_\_\_  
*City State Zip*

Phone #: \_\_\_\_\_ Message#: \_\_\_\_\_

Native American  Non-Indian D.O.B. \_\_\_\_\_ SSN: \_\_\_\_\_

Male  Female Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_ Hair Color: \_\_\_\_\_

Place Of Employment: \_\_\_\_\_

Job Title: \_\_\_\_\_ Phone# \_\_\_\_\_ Shift: \_\_\_\_\_

Work Address: \_\_\_\_\_

Distinguishing Feature Or Marks: \_\_\_\_\_

\_\_\_\_\_

Vehicle Make: \_\_\_\_\_ Model: \_\_\_\_\_ Year: \_\_\_\_\_ Color: \_\_\_\_\_

Other Identifier(s): \_\_\_\_\_

Updates (address, phone number, etc): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_