

Emancipation

This is the packet to be used when a minor wants the court to remove the “disability” of nonage. In other words, emancipation is the act by which a person gains all rights and responsibilities of an adult.

1. The completed original petition must be signed in the presence of a notary public or deputy clerk. To obtain a court order, the minor must be at least 16 years of age. The petition for emancipation of a minor must be completed and filed by the minor’s parent(s) or legal guardian, or if none, then by a guardian ad litem.
2. The completed original forms must be filed with the Clerk of the Circuit Court in the county where the minor lives (in Leon County, Leon County Courthouse, Suite 100, 301 S. Monroe Street, Tallahassee, FL 32301). You should keep a copy of this petition for your records.
3. A deputy clerk will notarize signatures for a fee, collect the appropriate filing fee, and assign a family law case number and judge to the action.
4. You must pay the appropriate filing fees to the Clerk of the Court. If you cannot afford to pay the filing fees, you may ask the Clerk to waive the filing fees by completing an Application for Determination of Civil Indigent Status.
5. You will be given a receipt that reflects your case number and a telephone number for the case manager.
6. Within about four weeks, you will hear from the case manager, and receive a court date if the file is complete or notification requesting any documents that may be missing from the file to process your case. You may be required to attend a final hearing.
7. At the court hearing deputy clerk will provide copies of the final judgment if entered, and collect certain fees for certification and recording.
8. Check with the case manager to see if you need to bring the Final Judgment of Emancipation form with you to the hearing. If you do, you should type or print the heading, including the circuit, county, case number, division, and the parties’ names, and leave the rest blank for the judge to complete at your hearing or trial.
9. If the court is satisfied that emancipation is in the minor’s best interest, it will enter an order removing the disability of nonage and authorize

the minor to perform all acts that the minor could do if he or she were 18 years of age. The order will be recorded in the public records of the county where the action was filed. The minor will need to obtain certified copies of the order to show proof of his or her emancipation.

10. The heading of the form calls for the name of the minor. Your current name should go where the documents ask for the name of the petitioner, as you are the one who is asking the court for something. The judicial circuit, case number, and division may be obtained from the clerk of court's office when you file the petition.
11. It may be helpful to compile a list of all of the people and/or places that will need a copy of your final judgment. This list may include the driver's license office, social security office, banks, schools, etc. A list will help you know how many copies of your order you should get from the clerk's office after your hearing.

IN THE CIRCUIT COURT OF THE SECOND JUDICIAL CIRCUIT
IN AND FOR LEON COUNTY, STATE OF FLORIDA

IN RE: EMANCIPATION OF:

_____,
a minor.

Case #: _____

PETITION FOR EMANCIPATION OF A MINOR

1. Petitioner, _____, whose address is

and whose relationship to the above minor is _____, petitions
this Court to remove the disability of nonage of the above minor.

2. The minor, _____, is 16 years of age or older. The
minor's date of birth is _____.

3. The minor currently resides at _____,
and has a mailing address of _____.

4. The minor is a resident of _____ County, Florida.

5. The parents of the above minor are _____, Father, whose
residence is _____

and whose mailing address is: _____

and _____, Mother, whose residence is

and whose mailing address is: _____.

6. The name, date of birth, custody and location of any children born to the minor are as follows:

Name: _____

Date of Birth: _____

Custody and location: _____

(Attach extra sheet if there are additional children.)

7. The minor's character, habits, education, income, and mental capacity for business are as follows: _____

8. The minor's needs with respect to food, shelter, clothing, medical care, and other necessities will be met as follows: _____

9. With respect to whether the minor is a party to or subject of a pending judicial proceeding in this State or any other jurisdiction or the subject of a judicial order of any description issued in connection with such judicial proceeding, such as a child support order, custody or visitation order or guardianship: *(check only **one**)*

___ The minor is not a party or subject to pending judicial proceedings.

___ The minor is a party to or subject to a pending judicial proceeding, namely, _____

(note the nature of proceedings, case number, court/jurisdiction where case is pending, and names and address of parties).

10. The disability of nonage should be removed from the minor for the following reason: _____

_____.

11. The above minor has joined in this petition and consents to the Court granting an Order of Emancipation as indicated and evidenced by the minor's signature on this petition.

WHEREFORE, the Petitioner and the Minor request that this Court enter an Order of Emancipation removing the disability of nonage of said Minor.

Signed on _____.

Signature of Petitioner

Printed name of Petitioner

Street Address of Petitioner

City/State/Zip of Petitioner

STATE OF FLORIDA

COUNTY OF _____

BEFORE ME, the undersigned authority, personally appeared _____, who has acknowledged before me that he/she is the Petitioner in the above Petition for Emancipation of a Minor and executed the same, and said person is ___ personally known to me OR ___ produced identification: _____.

Witness my hand and official seal on _____.

Notary Public/Deputy Clerk

CONSENT BY MINOR

I, _____, the above named minor,
consent to the entry by this Court of an Order of Emancipation and I am fully ready
to assume my responsibilities as an adult.

Signed on _____

Minor's signature

Minor's printed name

Minor's street address

Minor's City/State/Zip

STATE OF FLORIDA

COUNTY OF _____

BEFORE ME, the undersigned authority, personally appeared
_____, who has acknowledged before me that he/she is
the Minor that is the subject of the Petition for Emancipation of a Minor and that
he/she executed the foregoing Consent, and said person is ___ personally known OR
___ produced identification: _____.

Witness my hand and official seal on _____.

Notary Public/Deputy Clerk

IN THE _____ COURT OF THE SECOND JUDICIAL CIRCUIT
IN AND FOR LEON COUNTY, STATE OF FLORIDA

_____, Case No.: _____
Plaintiff/Petitioner,

vs.

_____,
Defendant/Respondent.

SUMMONS: PERSONAL SERVICE ON AN INDIVIDUAL
ORDEN DE COMPARECENCIA: SERVICIO PERSONAL EN UN INDIVIDUO
CITATION: L'ASSIGNATION PERSONAL SUR UN INDIVIDUEL

TO/PARA/A: {enter other party's full legal name} _____
{address(including city and state)/location for service} _____

IMPORTANT

A lawsuit has been filed against you. You have **20 calendar days**¹ after this summons is served on you to file a written response to the attached complaint/petition with the clerk of this circuit court, located at, 301 South Monroe Street, Tallahassee, FL 32301. A phone call will not protect you. Your written response, including the case number given above and the names of the parties, must be **filed** if you want the Court to hear your side of the case.

If you do not file your written response on time, you may lose the case, and your wages, money, and property may be taken thereafter without further warning from the Court. There are other legal requirements. You may want to call an attorney right away. If you do not know an attorney, you may call an attorney referral service or a legal aid office (listed in the phone book).

If you choose to file a written response yourself, at the same time you file your written response to the Court, you must also mail or take a copy of your written response to the party serving this summons at: {Name and address of party serving summons} _____

¹ Rule 1.140(a), Florida Rules of Civil Procedure, provides: (2) (A) Except when sued pursuant to FS 768.28, the state of Florida, an agency of the state, or an officer or employee of the state sued in an official capacity shall serve an answer to the complaint or crossclaim, or a reply to a counterclaim, within **40 days** after service; (B) When sued pursuant to FS 768.28, the Department of Financial Services or the defendant state agency shall have **30 days** from the date of service within which to serve an answer to the complaint or crossclaim or a reply to a counterclaim.

Copies of all court documents in this case, including orders, are available at the Clerk of the Circuit Court's office. You may review these documents, upon request. You must keep the Clerk of the Circuit Court's office notified of your current address. Future papers in this lawsuit will be mailed to the address on record at the clerk's office.

IMPORTANTE

Usted ha sido demandado legalmente. Tiene veinte (20) días, contados a partir del recibo de esta notificación, para contestar la demanda adjunta, por escrito, y presentarla ante este tribunal. Localizado en: 301 South Monroe Street, Tallahassee, FL 32301. Una llamada telefónica no lo protegerá. Si usted desea que el tribunal considere su defensa, debe presentar su respuesta por escrito, incluyendo el número del caso y los nombres de las partes interesadas. Si usted no contesta la demanda a tiempo, pudiese perder el caso y podría ser despojado de sus ingresos y propiedades, o privado de sus derechos, sin previo aviso del tribunal. Existen otros requisitos legales. Si lo desea, usted puede consultar a un abogado inmediatamente. Si no conoce a un abogado, puede llamar a una de las oficinas de asistencia legal que aparecen en la guía telefónica.

Si desea responder a la demanda por su cuenta, al mismo tiempo en que presente su respuesta ante el tribunal, usted debe enviar por correo o entregar una copia de su respuesta a la persona denominada abajo.

Si usted elige presentar personalmente una respuesta por escrito, en el mismo momento que usted presente su respuesta por escrito al Tribunal, usted debe enviar por correo o llevar una copia de su respuesta por escrito a la parte entregando esta orden de comparecencia a: Nombre y dirección de la parte que entrega la orden de comparecencia: _____

Copias de todos los documentos judiciales de este caso, incluyendo las ordenes, estan disponibles en la oficina del Secretario de Juzgado del Circuito [Clerk of the Circuit Court's office]. Estos documentos pueden ser revisados a su solicitud. Usted debe de mantener informada a la oficina del Secretario de Juzgado del Circuito de su dirección actual. Los papeles que se presenten en el futuro en esta demanda judicial seran enviados por correo a la dirección que este registrada en la oficina del Secretario.

IMPORTANT

Des poursuites judiciaires ont été entreprises contre vous. Vous avez 20 jours consécutifs à partir de la date de l'assignation de cette citation pour déposer une réponse écrite à la plainte ci-jointe auprès de ce tribunal. Qui se trouve à: {L'Adresse} 301 South Monroe Street, Tallahassee, FL 32301. Un simple coup de téléphone est insuffisant pour vous protéger; vous êtes obligés de déposer votre réponse écrite, avec mention du numéro de dossier ci-dessus et du nom des parties nommées ici, si vous souhaitez que le tribunal entende votre cause.

Si vous ne déposez pas votre réponse écrite dans le délai requis, vous risquez de perdre la cause ainsi que votre salaire, votre argent, et vos biens peuvent être saisis par la suite, sans aucun préavis ultérieur du tribunal. Il y a d'autres obligations juridiques et vous pouvez requérir les

services immediats d'un avocat. Si vous ne connaissez pas d'avocat, vous pourriez telephoner a un service de reference d'avocats ou a un bureau d'assistance juridique (figurant a l'annuaire de telephones).

Si vous choisissez de déposer vous-meme une reponse ecrite, il vous faudra egalement, en meme temps que cette formalite, faire parvenir ou expedier une copie au carbone ou une photocopie de votre reponse ecrite a la partie qui vous depose cette citation. Nom et adresse de la partie qui depose cette citation: _____

Les photocopies de tous les documents tribunaux de cette cause, y compris des arrêts, sont disponibles au bureau du greffier. Vous pouvez revue ces documents, sur demande. Il faut aviser le greffier de votre adresse actuelle. Les documents de l'avenir de ce proces seront envoyer a l' adresse que vous donnez au bureau du greffier.

THE STATE OF FLORIDA
TO EACH SHERIFF OF THE STATE:

You are commanded to serve this summons and a copy of the complaint in this lawsuit on the above-named person.

DATED: _____

(SEAL)

GWEN MARSHALL
CLERK OF THE CIRCUIT COURT

By: _____
Deputy Clerk

INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.900(h), NOTICE OF RELATED CASES (11/13)

When should this form be used?

Florida Rule of Judicial Administration 2.545(d) requires the **petitioner** in a family law case to file with the court a notice of related cases, if any. Your circuit may also require this form to be filed even if there are no related cases. A case is considered related if

- it involves the same parties, children, or issues and is pending when the family law case is filed; or
- it affects the court's jurisdiction to proceed; or
- an order in the related case may conflict with an order on the same issues in the new case; or
- an order in the new case may conflict with an order in the earlier case.

This form is used to provide the required notice to the court.

This form should be typed or printed in black ink. It must be **filed** with the **clerk of the circuit court** with the initial pleading in the family law case.

What should I do next?

A copy of the form must be served on the presiding judges, either the chief judge or the family law administrative judge, and all parties in the related cases. You should also keep a copy for your records. **Service** must be in accordance with Florida Rule of Judicial Administration 2.516.

Where can I look for more information?

Before proceeding, you should read "General Information for Self-Represented Litigants" found at the beginning of these forms. The words that are in "**bold underline**" in these instructions are defined there. For further information, see Florida Rule of Judicial Administration 2.545(d).

Special notes . . .

Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of a **Disclosure from Nonlawyer**, Florida

Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms **must** also put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____

Division: _____

Petitioner,
and

Respondent.

NOTICE OF RELATED CASES

1. Petitioner submits this Notice of Related Cases as required by Florida Rule of Judicial Administration 2.545(d). A related case may be an open or closed civil, criminal, guardianship, domestic violence, juvenile delinquency, juvenile dependency, or domestic relations case. A case is "related" to this family law case if it involves any of the same parties, children, or issues and it is pending at the time the party files a family case; if it affects the court's jurisdiction to proceed; if an order in the related case may conflict with an order on the same issues in the new case; or if an order in the new case may conflict with an order in the earlier litigation.

[check **one** only]

☐ **There are no related cases.**

☐ **The following are the related cases (add additional pages if necessary):**

Related Case No. 1

Case Name(s): _____

Petitioner _____

Respondent _____

Case No.: _____ Division: _____

Type of Proceeding: [check **all** that apply]

☐ Dissolution of Marriage

☐ Custody

☐ Child Support

☐ Juvenile Dependency

☐ Termination of Parental Rights

☐ Domestic/Sexual/Dating/Repeat

Violence or Stalking Injunctions

☐ Paternity

☐ Adoption

☐ Modification/Enforcement/Contempt Proceedings

☐ Juvenile Delinquency

☐ Criminal

☐ Mental Health

☐ Other {specify} _____

State where case was decided or is pending: ____ Florida ____ Other: {specify} _____

Name of Court where case was decided or is pending (*for example, Fifth Circuit Court, Marion County, Florida*): _____

Title of last Court Order/Judgment (if any): _____

Date of Court Order/Judgment (if any): _____

Relationship of cases check **all** that apply]:

____ pending case involves same parties, children, or issues;

____ may affect court's jurisdiction;

____ order in related case may conflict with an order in this case;

____ order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases: _____

Related Case No. 2

Case Name(s): _____

Petitioner _____

Respondent _____

Case No.: _____ Division: _____

Type of Proceeding: [check **all** that apply]

____ Dissolution of Marriage

____ Paternity

____ Custody

____ Adoption

____ Child Support

____ Modification/Enforcement/Contempt Proceedings

____ Juvenile Dependency

____ Juvenile Delinquency

____ Termination of Parental Rights

____ Criminal

____ Domestic/Sexual/Dating/Repeat

____ Mental Health

Violence or Stalking Injunctions

____ Other {specify} _____

State where case was decided or is pending: ____ Florida ____ Other: {specify} _____

Name of Court where case was decided or is pending (*for example, Fifth Circuit Court, Marion County, Florida*): _____

Title of last Court Order/Judgment (if any): _____

Date of Court Order/Judgment (if any): _____

Relationship of cases check all that apply]:

____ pending case involves same parties, children, or issues;

- ☐ may affect court's jurisdiction;
☐ order in related case may conflict with an order in this case;
☐ order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases: _____

Related Case No. 3

Case Name(s): _____
 Petitioner _____
 Respondent _____
 Case No.: _____ Division: _____

Type of Proceeding: [check **all** that apply]

- | | |
|--|--|
| <input type="checkbox"/> Dissolution of Marriage | <input type="checkbox"/> Paternity |
| <input type="checkbox"/> Custody | <input type="checkbox"/> Adoption |
| <input type="checkbox"/> Child Support | <input type="checkbox"/> Modification/Enforcement/Contempt Proceedings |
| <input type="checkbox"/> Juvenile Dependency | <input type="checkbox"/> Juvenile Delinquency |
| <input type="checkbox"/> Termination of Parental Rights | <input type="checkbox"/> Criminal |
| <input type="checkbox"/> Domestic/Sexual/Dating/Repeat
Violence or Stalking Injunctions | <input type="checkbox"/> Mental Health |
| | <input type="checkbox"/> Other {specify} _____ |

State where case was decided or is pending: ☐ Florida ☐ Other: {specify} _____

Name of Court where case was decided or is pending (*for example, Fifth Circuit Court, Marion County, Florida*): _____

Title of last Court Order/Judgment (if any): _____

Date of Court Order/Judgment (if any): _____

Relationship of cases check all that apply]:

- ☐ pending case involves same parties, children, or issues;
☐ may affect court's jurisdiction;
☐ order in related case may conflict with an order in this case;
☐ order in this case may conflict with previous order in related case.

Statement as to the relationship of the cases: _____

2. [check **one** only]

☐ I **do not** request coordination of litigation in any of the cases listed above.

_____ I **do** request coordination of the following cases: _____

3. [check **all** that apply]

_____ Assignment to one judge

_____ Coordination of existing cases

will conserve judicial resources and promote an efficient determination of these cases
because:_____.

4. The Petitioner acknowledges a continuing duty to inform the court of any cases in this or any other state that could affect the current proceeding.

Dated: _____

Petitioner's Signature

Printed Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Fax Number: _____

E-mail Address(es): _____

CERTIFICATE OF SERVICE

I **CERTIFY** that I delivered a copy of this Notice of Related Cases to the _____ County Sheriff's Department or a certified process server for service on the Respondent, and [**check all used**]
() e-mailed () mailed () hand delivered, a copy to {name}_____, who is the
[**check all that apply**] () judge assigned to new case, () chief judge or family law administrative
judge, () {name}_____ a party to the related case, () {name}
_____, a party to the related case on {date}_____.

Signature of Petitioner/Attorney for Petitioner

Printed Name: _____

Address: _____

City, State, Zip: _____

Telephone Number: _____

Fax Number: _____

E-mail Address(es): _____

Florida Bar Number: _____

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:

[fill in **all** blanks] This form was prepared for the {choose **only one**}: () Petitioner () Respondent.

This form was completed with the assistance of:

{name of individual} _____,

{name of business} _____,

{address} _____,

{city} _____ {state} _____, {telephone number} _____.

INSTRUCTIONS FOR FLORIDA SUPREME COURT APPROVED FAMILY LAW FORM 12.910(b), PROCESS SERVICE MEMORANDUM (11/15)

When should this form be used?

You should use this form to give the sheriff's department (or private process server) instructions for serving the other party in your case with the **Summons: Personal Service on an Individual**, Florida Family Law Rules of Procedure Form 12.910(a), and other papers to be served. On this form you can tell the sheriff's department the best times to find the person at work and/or at home. You can also include a map to the other person's home or work place to help the sheriff find the person and deliver the summons. Do not forget to attach to the summons a copy of your initial petition and any other papers you want personally served on the other party.

This form should be typed or printed in black ink. After completing this form, you should **file** the original with the clerk of the circuit court in the county where your petition was filed and attach a copy to the **Summons: Personal Service on an Individual**, Florida Family Law Rules of Procedure Form 12.910(a). You should also keep a copy for your records.

IMPORTANT INFORMATION REGARDING E-FILING

The Florida Rules of Judicial Administration now require that all petitions, pleadings, and documents be filed electronically except in certain circumstances. **Self-represented litigants may file petitions or other pleadings or documents electronically; however, they are not required to do so.** If you choose to file your pleadings or other documents electronically, you must do so in accordance with Florida Rule of Judicial Administration 2.525, and you must follow the procedures of the judicial circuit in which you file. **The rules and procedures should be carefully read and followed.**

Where can I look for more information?

Before proceeding, you should read General Information for Self-Represented Litigants found at the beginning of these forms. You should read the instructions for **Summons: Personal Service on an Individual**, Florida Family Law Rules of Procedure Form 12.910(a), for additional information.

IMPORTANT INFORMATION REGARDING E-SERVICE ELECTION

After the initial service of process of the petition or supplemental petition by the Sheriff or certified process server, the Florida Rules of Judicial Administration now require that all documents required or permitted to be served on the other party must be served by electronic mail (e-mail) except in certain circumstances. **You must strictly comply with the format requirements set forth in the Rules of Judicial Administration.** If you elect to participate in electronic service, which means serving or receiving pleadings by electronic mail (e-mail), or through the Florida Courts E-Filing Portal, you **must** review Florida Rule of Judicial Administration 2.516. You may find this rule at www.flcourts.org through the link to the Rules of Judicial Administration provided under either Family Law Forms: Getting Started, or Rules of Court in the A-Z Topical Index.

SELF-REPRESENTED LITIGANTS MAY SERVE DOCUMENTS BY E-MAIL; HOWEVER, THEY ARE NOT

REQUIRED TO DO SO. If a self-represented litigant elects to serve and receive documents by e-mail, the procedures must always be followed once the initial election is made.

To serve and receive documents by e-mail, you must designate your e-mail addresses by using the **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915, and you must provide your e-mail address on each form on which your signature appears. Please **CAREFULLY** read the rules and instructions for: **Certificate of Service (General)**, Florida Supreme Court Approved Family Law Form 12.914; **Designation of Current Mailing and E-mail Address**, Florida Supreme Court Approved Family Law Form 12.915; and Florida Rule of Judicial Administration 2.516.

Special notes...

If you fear that disclosing your address would put you in danger because you are the victim of sexual battery, aggravated child abuse, stalking, aggravated stalking, harassment, aggravated battery, or domestic violence, you should complete a **Request for Confidential Filing of Address**, Florida Supreme Court Approved Family Law Form 12.980(h), file it with the clerk, and write confidential in the space provided on the petition.

Nonlawyer. Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900 (a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____

Division: _____

_____,
Petitioner,

and

_____,
Respondent,

PROCESS SERVICE MEMORANDUM

TO: _____ Sheriff of _____ County, Florida; _____ Division
_____ Private process server: _____

Please serve the *{name of document(s)}* _____

in the above-styled cause upon:

Party: *{full legal name}* _____

Address or location for service: _____

Work Address: _____

If the party to be served owns, has, and/or is known to have guns or other weapons, describe what type of weapon(s): _____

SPECIAL INSTRUCTIONS: _____

Dated: _____

Signature of Party

*Printed Name: _____

*Address: _____

*City, State, Zip: _____

*Telephone Number: _____

*Fax Number: _____

*Designated E-mail Address(es) _____

*** Please see the Special Notes section in the instructions to this form regarding Florida Supreme Court Approved Family Law Form 12.980(h), Request for Confidential Filing of Address, which may be used if you need to keep your addresses or telephone numbers confidential for safety reasons.**

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS BELOW:

[fill in **all** blanks] This form was prepared for the Petitioner. This form was completed with the assistance of:

{name of individual} _____,

{name of business} _____,

{address} _____,

{city} _____, *{state}* _____, *{zip code}* _____, *{telephone number}* _____

**IN THE CIRCUIT/COUNTY COURT OF THE SECOND JUDICIAL CIRCUIT
IN AND FOR LEON COUNTY, FLORIDA**

Plaintiff/Petitioner or In the Interest Of

vs.

Case #: _____

Defendant/Respondent.

APPLICATION FOR DETERMINATION OF CIVIL INDIGENT STATUS

1. I have _____ dependents. (Include only those persons you list on your U.S. Income tax return.)

Are you Married?...Yes....No Does your Spouse Work?...Yes....No Annual Spouse Income? \$ _____

2. I have a net income of \$ _____ paid () weekly () every two weeks () semi-monthly () monthly () yearly () other _____

(Net income is your total income including salary, wages, bonuses, commissions, allowances, overtime, tips and similar payments, **minus** deductions required by law and other court-ordered payments such as child support.)

3. I have other income paid () weekly () every two weeks () semi-monthly () monthly () yearly () other _____.

(Circle "Yes" and fill in the amount if you have this kind of income, otherwise circle "No")

Second Job	Yes \$ _____	No	Veterans' benefits.....	Yes \$ _____	No
Social Security benefits			Workers compensation	Yes \$ _____	No
For you	Yes \$ _____	No	Income from absent family members	Yes \$ _____	No
For child(ren).....	Yes \$ _____	No	Stocks/bonds.....	Yes \$ _____	No
Unemployment compensation.....	Yes \$ _____	No	Rental income	Yes \$ _____	No
Union payments	Yes \$ _____	No	Dividends or interest.....	Yes \$ _____	No
Retirement/pensions	Yes \$ _____	No	Other kinds of income not on the list	Yes \$ _____	No
Trusts	Yes \$ _____	No	Gifts.....	Yes \$ _____	No

I understand that I will be required to make payments for costs to the clerk in accordance with §57.082(5), Florida Statutes, as provided by law, although I may agree to pay more if I choose to do so.

4. I have other assets: (Circle "yes" and fill in the value of the property, otherwise circle "No")

Cash	Yes \$ _____	No	Savings account	Yes \$ _____	No
Bank account(s)	Yes \$ _____	No	Stocks/bonds.....	Yes \$ _____	No
Certificates of deposit or			Homestead Real Property*	Yes \$ _____	No
money market accounts	Yes \$ _____	No	Motor Vehicle*	Yes \$ _____	No
Boats*	Yes \$ _____	No	Non-homestead real property/real estate*	Yes \$ _____	No

*show loans on these assets in paragraph 5

Check one: I () DO () DO NOT expect to receive more assets in the near future. The asset is _____.

5. I have total liabilities and debts of \$ _____ as follows:

Home \$ _____	Other Real Property \$ _____	Motor Vehicle \$ _____
Credit Cards \$ _____	Medical Bills \$ _____	Child Support paid direct \$ _____
Other \$ _____		Cost of medicines (monthly) \$ _____

6. I have a private lawyer in this case..... Yes No

A person who knowingly provides false information to the clerk or the court in seeking a determination of indigent status under FS 27.52/57.082 commits a misdemeanor of the first degree, punishable as provided in FS 775.082 or 775.083. I attest that the information I have provided on this application is true and accurate to the best of my knowledge.

Signed on _____

Signature of Applicant for Indigent Status

Print Full Legal Name: _____

Date of Birth Last 4 Digits of Driver License or ID #

Phone #: _____

Address

Email Address

City, State, Zip

CLERK DETERMINATION

Based on the information in this Application, pursuant to FS 57.082, I have determined the applicant to be:

() Indigent
() Not Indigent.

Date: _____

Clerk of the Circuit Court, by Deputy Clerk: _____

This form was completed with the assistance of:

Clerk/Deputy Clerk/Other authorized person

APPLICANTS FOUND NOT INDIGENT MAY SEEK REVIEW BY THE JUDGE BY ASKING FOR A HEARING TIME. Sign on this line if you want the judge to review the clerk's determination of not indigent. _____

INSTRUCTIONS FOR FLORIDA FAMILY LAW RULES OF PROCEDURE FORM 12.928, COVER SHEET FOR FAMILY COURT CASES (11/13)

When should this form be used?

The Cover Sheet for Family Court Cases and the information contained in it neither replace nor supplement the filing and service of pleadings or other documents as required by law. This form shall be filed by the petitioner/party opening or reopening a case for the use of the clerk of the circuit court for the purpose of reporting judicial workload data pursuant to Florida Statutes section 25.075.

This form should be typed or printed in black ink. The petitioner must file this cover sheet with the first pleading or motion filed to open or reopen a case in all domestic and juvenile cases.

What should I do next?

Follow these instructions for completing the form:

- I. Case Style. Enter the name of the court, the appropriate case number assigned at the time of filing of the original petition, the name of the judge assigned (if applicable), and the name (last, first, middle initial) of the petitioner(s) and respondent(s).
- II. Type of Action /Proceeding. Place a check beside the proceeding you are initiating. If you are simultaneously filing more than one type of proceeding against the same opposing party, such as a modification and an enforcement proceeding, complete a separate cover sheet for each action being filed.
 - (A) Initial Action/Petition
 - (B) Reopening Case. If you check "Reopening Case," indicate whether you are filing a modification or supplemental petition or an action for enforcement by placing a check beside the appropriate action/petition.
 1. Modification/Supplemental Petition
 2. Motion for Civil Contempt/ Enforcement
 3. Other – All reopening actions not involving modification/supplemental petitions or petition enforcement.
- III. Type of Case. Place a check beside the appropriate case. If the case fits more than one category, select the most definitive. Definitions of the categories are provided below.
 - (A) Simplified Dissolution of Marriage- petitions for the termination of marriage pursuant to Florida Family Law Rule of Procedure 12.105.
 - (B) Dissolution of Marriage - petitions for the termination of marriage pursuant to Chapter 61, Florida Statutes, other than simplified dissolution.
 - (C) Domestic Violence - all matters relating to injunctions for protection against domestic violence pursuant to section 741.30, Florida Statutes.

- (D) Dating Violence - all matters relating to injunctions for protection against dating violence pursuant to section 784.046, Florida Statutes.
- (E) Repeat Violence - all matters relating to injunctions for protection against repeat violence pursuant to section 784.046, Florida Statutes.
- (F) Sexual Violence - all matters relating to injunctions for protection against sexual violence pursuant to section 784.046, Florida Statutes.
- (G) Stalking-all matters relating to injunctions for protection against stalking pursuant to section 784.0485, Florida Statutes
- (H) Support - IV-D - all matters relating to child or spousal support in which an application for assistance has been filed with the Department of Revenue, Child Support Enforcement under Title IV-D, Social Security Act, except for such matters relating to dissolution of marriage petitions (sections 409.2564, 409.2571, and 409.2597, Florida Statutes), paternity, or UIFSA.
- (I) Support-Non IV-D - all matters relating to child or spousal support in which an application for assistance has **not** been filed under Title IV-D, Social Security Act.
- (J) UIFSA- IV-D - all matters relating to Chapter 88, Florida Statutes, in which an application for assistance has been filed under Title IV-D, Social Security Act.
- (K) UIFSA - Non IV-D - all matters relating to Chapter 88, Florida Statutes, in which an application for assistance has **not** been filed under Title IV-D, Social Security Act.
- (L) Other Family Court - all matters involving time-sharing and/or parenting plans relating to minor child(ren), support unconnected with dissolution of marriage, annulment, delayed birth certificates pursuant to Florida Statutes section 382.0195, expedited affirmation of parental status pursuant to Florida Statutes section 742.16, termination of parental rights proceedings pursuant to Florida Statutes section 63.087, declaratory judgment actions related to premarital, marital, post-marital agreements, or other matters not included in the categories above.
- (M) Adoption Arising Out Of Chapter 63 - all matters relating to adoption pursuant to Chapter 63, Florida Statutes, excluding any matters arising out of Chapter 39, Florida Statutes.
- (N) Name Change - all matters relating to name change, pursuant to section 68.07, Florida Statutes.
- (O) Paternity/Disestablishment of Paternity – all matters relating to paternity pursuant to Chapter 742, Florida Statutes.
- (P) Juvenile Delinquency - all matters relating to juvenile delinquency pursuant to Chapter 985, Florida Statutes.
- (Q) Petition for Dependency - all matters relating to petitions for dependency.
- (R) Shelter Petition – all matters relating to shelter petitions pursuant to Chapter 39, Florida Statutes.
- (S) Termination of Parental Rights Arising Out Of Chapter 39 – all matters relating to termination of parental rights pursuant to Chapter 39, Florida Statutes.
- (T) Adoption Arising Out Of Chapter 39 – all matters relating to adoption pursuant to Chapter 39, Florida Statutes.
- (U) CINS/FINS – all matters relating to children in need of services (and families in need of services) pursuant to Chapter 984, Florida Statutes.

ATTORNEY OR PARTY SIGNATURE. Sign the Cover Sheet for Family Court Cases. Print legibly the name of the person signing the Cover Sheet for Family Court Cases. Attorneys must include a Florida Bar number. Insert the date the Cover Sheet for Family Court Cases is signed. Signature is a certification that filer has provided accurate information on the Cover Sheet for Family Court Cases.

Nonlawyer Remember, a person who is NOT an attorney is called a nonlawyer. If a nonlawyer helps you fill out these forms, that person must give you a copy of **Disclosure from Nonlawyer**, Florida Family Law Rules of Procedure Form 12.900(a), before he or she helps you. A nonlawyer helping you fill out these forms also **must** put his or her name, address, and telephone number on the bottom of the last page of every form he or she helps you complete.

Where can I look for more information?

Before proceeding, you should read “General Information for Self-Represented Litigants” found at the beginning of these forms. For further information, see Rule 12.100, Florida Family Law Rules of Procedure.

COVER SHEET FOR FAMILY COURT CASES

I. Case Style

IN THE CIRCUIT COURT OF THE _____ JUDICIAL CIRCUIT,
IN AND FOR _____ COUNTY, FLORIDA

Case No.: _____

Judge: _____

Petitioner

and

Respondent

II. Type of Action/Proceeding. Place a check beside the proceeding you are initiating. If you are simultaneously filing more than one type of proceeding against the same opposing party, such as a modification and an enforcement proceeding, complete a separate cover sheet for each action being filed. **If you are reopening a case, choose one of the three options below it.**

- (A) ____ Initial Action/Petition
- (B) ____ Reopening Case
 - 1. ____ Modification/Supplemental Petition
 - 2. ____ Motion for Civil Contempt/Enforcement
 - 3. ____ Other

III. Type of Case. If the case fits more than one type of case, select the most definitive.

- (A) ____ Simplified Dissolution of Marriage
- (B) ____ Dissolution of Marriage
- (C) ____ Domestic Violence
- (D) ____ Dating Violence
- (E) ____ Repeat Violence
- (F) ____ Sexual Violence
- (G) ____ Stalking
- (H) ____ Support IV-D (Department of Revenue, Child Support Enforcement)
- (I) ____ Support Non-IV-D (**not** Department of Revenue, Child Support Enforcement)
- (J) ____ UIFSA IV-D (Department of Revenue, Child Support Enforcement)
- (K) ____ UIFSA Non-IV-D (**not** Department of Revenue, Child Support Enforcement)
- (L) ____ Other Family Court
- (M) ____ Adoption Arising Out Of Chapter 63
- (N) ____ Name Change

- (O) ____ Paternity/Disestablishment of Paternity
 (P) ____ Juvenile Delinquency
 (Q) ____ Petition for Dependency
 (R) ____ Shelter Petition
 (S) ____ Termination of Parental Rights Arising Out Of Chapter 39
 (T) ____ Adoption Arising Out Of Chapter 39
 (U) ____ CINS/FINS

IV. Rule of Judicial Administration 2.545(d) requires that a Notice of Related Cases Form, Family Law Form 12.900(h), be filed with the initial pleading/petition by the filing attorney or self-represented litigant in order to notify the court of related cases. Is Form 12.900(h) being filed with this Cover Sheet for Family Court Cases and initial pleading/petition?

____ No, to the best of my knowledge, no related cases exist.

____ Yes, all related cases are listed on Family Law Form 12.900(h).

ATTORNEY OR PARTY SIGNATURE

I CERTIFY that the information I have provided in this cover sheet is accurate to the best of my knowledge and belief.

Signature _____ FL Bar No.: _____
 Attorney or party (Bar number, if attorney)

 (Type or print name) (E-mail Address(es))

 Date

IF A NONLAWYER HELPED YOU FILL OUT THIS FORM, HE/SHE MUST FILL IN THE BLANKS

BELOW: [fill in **all** blanks]

This form was prepared for the: {choose only **one**} () Petitioner () Respondent

This form was completed with the assistance of:

{name of individual} _____,
 {name of business} _____,
 {address} _____,
 {city} _____, {state} _____, {telephone number} _____.