

STATE OF INDIANA)

IN THE ELKHART SUPERIOR COURT 6

COUNTY OF ELKHART)

CASE NO: _____

IN RE THE _____

OF: _____

(Child's Name if Required)

Name of Person Filing

Mother Father Other _____

And

Name of Person Responding

Mother Father Other _____

MOTION TO MODIFY PARENTING TIME

Parties ARE in agreement Parties are NOT in agreement

This information must be completed before the Court will set a hearing, unless there is a verifiable emergency. Attach additional documents explaining why Local Rules and other requirements should be waived.

Comes now _____, self-represented, and hereby files a Petition to Modify Parenting Time, and states as follows:

1. That parents have _____ unemancipated child(ren), namely:

Child's Name	Date of Birth
_____	_____
_____	_____
_____	_____
_____	_____

2. That the parties' divorce decree **-OR-** decree establishing paternity **-OR-** Miscellaneous Civil Custody Order is dated _____.

3. That _____ has been ordered to pay child support in the amount of \$_____ per week.

4. That the last order on parenting time is dated _____ and _____ has primary physical custody of the minor child(ren).

5. That the last order on parenting time states that parenting time shall be as follows:

6. That a change in parenting time is in the best interest of the child(ren) because:

7. That I am asking the Court to hold a hearing or to enter a parenting time order:

In accordance with the Indiana Parenting Time Guidelines

-OR-

As follows:

-OR-

Per attached Agreed Parenting Plan

WHEREFORE, I request that the Court modify the existing parenting time order as is appropriate and order all further relief that is just and proper in the premises.

I affirm under the penalties for perjury that the foregoing representations and statements are true.

Signature

Date

Printed Name

Email Address

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of this Motion to the other person's attorney, or to the other person if they are not represented by an attorney, via:

- Registered mail at this address: _____
- Certified mail at this address: _____
- Sheriff for \$28.00
- E-Service per Trial Rule 86 at this email address: _____
- Hand delivery at this address: _____
- Other: _____

Signature

Date