

Vermillion Circuit Court Clerk
255 S. Main St.
3rd Floor Courthouse
PO Box 10
Newport, Indiana 47966
765-492-5350

FILING DIVORCE WITHOUT ASSISTANCE FROM AN ATTORNEY/WITH CHILDREN

THE JUDGE, COURT STAFF, CLERK OR CLERK STAFF MAY NOT GIVE YOU LEGAL ADVICE OR ANSWER QUESTIONS REGARDING THE FORMS.

****Websites which may provide additional assistance****

**Self-Represented Litigant <http://www.in.gov/judiciary/selfservice/>
Child Support Calculation <http://www.in.gov/judiciary/childsupport/>
www.vermilliongov.us (check filing fees)**

1. To begin the process, you must file the Verified Petition For Dissolution of Marriage, Summons and Appearance. **Make (2) copies of every form you fill out.**
2. Bring forms to the Vermillion County Clerk's Office, plus the filing fee, which includes the Respondent being served by certified mail. If you wish for the Respondent to be served by Sheriff, you must pay the additional Sheriff's service fee. We accept the following forms of payment:
 - Cash**
 - Money Order**
 - Certified Check**
 - Credit Card (Visa, MC & Discover) - Convenience Fee Applies**
3. **IF** you wish to have a Provisional Hearing, you must also have your Motion For Provisional Hearing and Notice of Provisional Hearing completed. **Most people do not request a Provisional Hearing.**
4. Indiana Law requires a minimum sixty (60) day waiting period after the Petition is filed before the divorce may be granted. At the end of the sixty (60) days, either party must file:
Motion for Final Hearing and Notice of Final Hearing
OR
Verified Waiver of Final Hearing, Decree of Dissolution of Marriage and Settlement Agreement, and Child Support Obligation Worksheet (<http://www.in.gov/judiciary/childsupport/>).
5. If the forms dealing with the Verified Waiver of Final Hearing, Decree of Dissolution of Marriage and Settlement Agreement, and Child Support Obligation Worksheet are filed and properly completed, the Court may grant the divorce without a hearing. However, there is no guarantee that Judge will grant the divorce without a hearing or without requiring additional information.

**STATE OF INDIANA
VERMILLION CIRCUIT COURT**

IN RE: THE MARRIAGE OF

Petitioner

and

83C01-_____ -DC-_____

Respondent

APPEARANCE

- 1. Self Represented Party Name: _____
- 2. Address of Party: _____
- 3. Phone Number: _____
- 4. Case Type: DC
- 5. Names of Family Members: _____

- 6. Are there related cases? Yes Cause Number: _____
 No

Date

Petitioner's Signature

STATE OF INDIANA
VERMILLION CIRCUIT COURT

IN RE: THE MARRIAGE OF

Petitioner

and

83C01-_____-DC-_____

Respondent

VERIFIED PETITION FOR DISSOLUTION OF MARRIAGE

The Petitioner states:

1. The Petitioner resides at:

The Respondent resides at:

Mailing Address & PO Box

Mailing Address & PO Box

City, State, Zip

City, State, Zip

Phone number

Phone number

2. The parties were married on _____, and separated on _____.

3. The Petitioner or Respondent has been a continuous resident of Vermillion County for the last three (3) months, and has resided in the State of Indiana for the last six (6) months.

4. The wife is not now pregnant. There is/are _____ child(ren) born of the marriage:

Name:

Date of Birth:

5. That _____ is a fit and proper person to have custody of the minor child(ren).

6. _____ Neither parties is a member of the military
_____ One or both parties are members of the military

7. The marriage has suffered an irretrievable breakdown and should be dissolved.

8. _____ Wife would like her former name of: _____ restored.
_____ Wife DOES NOT want to change her name.

I request that this Court issue an order dissolving the marriage of the parties, and for all other just and proper relief.

I affirm under the penalties of perjury that the foregoing representations are true.

Date

Petitioner's Signature

**STATE OF INDIANA
VERMILLION CIRCUIT COURT**

IN RE: THE MARRIAGE OF

Petitioner

and

83C01-_____ -DC-_____

Respondent

SUMMONS

Respondent's address:

1. You are hereby notified that you have been sued by the Petitioner for Dissolution of Marriage.
2. If a Notice of Provisional Hearing is attached to this summons, you should appear in Court on the date and time stated on the notice. **If you do not appear, evidence may be heard in your absence and a determination made by the Court.** If a Temporary Restraining Order is attached, it is effective immediately upon your receipt.
3. If you wish to retain an attorney to represent you, it is advisable to do so before the date stated in the Notice of Provisional Hearing.
4. If you take no action in this case after the receipt of this summons, the Court can grant a Dissolution of Marriage or make a determination regarding any of the following: child custody, child support, maintenance, parenting time, property division (real or personal) and any other distribution of assets and debts.

Date

Vermillion County Clerk Signature

**Vermillion Circuit Court Clerk
PO Box 10
Newport, IN 47966
(765)-492-5350**

The following manner of service is hereby requested:

_____ **Certified Mail**
_____ **Sheriff Service**

**STATE OF INDIANA
VERMILLION CIRCUIT COURT**

IN RE: THE MARRIAGE OF

Petitioner

and

83C01-_____ -DC- _____

Respondent

MOTION FOR PROVISIONAL HEARING

I request the Court hold a Provisional Hearing to issue a Provisional (temporary) Order for the following:

- _____ Temporary Custody of the minor child(ren).
- _____ Temporary child support for the minor child(ren)
- _____ Temporary parenting time (visitation) for the non-custodial parent
- _____ Temporary possession of marital residence
- _____ Temporary division of debts
- _____ Temporary division of property
- _____ Restraining the parties from removing the child(ren) from the state without permission of the Court of all parties.
- _____ Restraining the parties from transferring, encumbering, concealing, or in any way disposing of any property of the parties
- _____ Other _____

I affirm under the penalties of perjury that the foregoing representations are true.

Date

Petitioner's Signature

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of the Motion by first class mail to the opposing attorney, or opposing party, if not represented on _____, 20____.

Petitioner's Signature

**STATE OF INDIANA
VERMILLION CIRCUIT COURT**

IN RE: THE MARRIAGE OF

Petitioner

and

83C01-_____ -DC-_____

Respondent

NOTICE OF PROVISIONAL HEARING

A Verified Petition for Dissolution of Marriage and request for Provisional Hearing has been filed in this Court.

The Court hereby sets a Provisional Hearing on _____ 20____,
at _____ A.M. / P.M.

The parties may present evidence on their behalf. Failure to appear may result in matters being decided in your absence.

SO ORDERED this _____ day of _____, 20_____.

Judge, Vermillion Circuit Court

**STATE OF INDIANA
VERMILLION CIRCUIT COURT**

IN RE: THE MARRIAGE OF

Petitioner

and

83C01-_____ -DC-_____

Respondent

MOTION FOR FINAL HEARING

I request this matter be set for Final Hearing. It has been sixty (60) days or more since the Petition for Dissolution was filed. The hearing will take

- _____ 15 minutes or less
- _____ 60 minutes or less
- _____ more than 60 minutes

Therefore, I request the Court to set this for Final Hearing.

Date

Signature

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of the Motion by first class mail to the opposing attorney, or opposing party, if not represented on _____, 20____.

Signature

**STATE OF INDIANA
VERMILLION CIRCUIT COURT**

IN RE: THE MARRIAGE OF

Petitioner

and

83C01-_____ -DC-_____

Respondent

NOTICE OF FINAL HEARING

A Motion For Final Hearing has been filed in this Court. The Court now sets this matter for a Final Hearing on _____, 20____, at _____ a.m./p.m. The parties may present evidence on their behalf. Failure to appear may result in matters being decided in your absence.

SO ORDERED this _____ day of _____, 20____.

Judge, Vermillion Circuit Court

**STATE OF INDIANA
VERMILLION CIRCUIT COURT**

IN RE: THE MARRIAGE OF

Petitioner

and

83C01-_____ -DC- _____

Respondent

VERIFIED WAIVER OF FINAL HEARING

Comes now the Petitioner and Respondent, pursuant to Ind. Code 31-1-11.5-8 and submit their Verified Waiver of Final Hearing. In support of this Waiver, the parties state that:

1. More than sixty (60) days have elapsed since the filing of the Petitioner's Verified Petition for Dissolution of Marriage;
2. Both parties request the Court to approve their Decree of Dissolution of Marriage and Settlement Agreement;
3. Both parties voluntarily waive the opportunity to hold a Final Hearing on contested issues.

I affirm under the penalties of perjury that the foregoing representations are true.

Date: _____

Petitioner's Signature

Spouse's Signature

**STATE OF INDIANA
VERMILLION CIRCUIT COURT**

IN RE: THE MARRIAGE OF

Petitioner

and

83C01-_____ -DC- _____

Respondent

DECREE OF DISSOLUTION OF MARRIAGE AND SETTLEMENT AGREEMENT

The parties having submitted their Settlement Agreement and the Court having seen and considered the Verified Petition for Dissolution of Marriage and Verified Waiver of Final Hearing submitted by the parties, now approves the following agreement:

1. The parties were married on _____, and separated on _____.
2. The Petitioner or Respondent has been a continuous resident of Vermillion County for the last three (3) months, and resided in the State of Indiana for the last six (6) months.
3. ____ Neither party is a member of the military
____ One or both parties are members of the military
4. Wife is not pregnant
5. There is/are _____ child(ren) born of the marriage:

Name:

Date of Birth:

6. The parties agree and state that it is in the best interest of the child(ren) that:
____ **Petitioner** shall have sole physical and legal custody of the child(ren).
____ **Respondent** shall have sole physical and legal custody of the child(ren).
____ **Petitioner** shall have sole physical custody and the parties shall have joint legal custody of the child(ren).
____ **Respondent** shall have sole physical custody and the parties shall have joint legal custody of the child(ren).

7. The parties have agreed on the following Parenting Time (Visitation) order:
_____ **Petitioner** shall have reasonable visitation with the minor child(ren) as the parties agree or according to the Indiana Parenting Time guidelines.
_____ **Respondent** shall have reasonable visitation with the minor child(ren) as the parties agree or according to the Indiana Parenting Time guidelines.
_____ Other: _____
8. _____ will pay child support in the amount of _____ per week, as shown by the attached child support worksheet, through the County Clerk's office, or by income withholding order if available from the employer, beginning on the first Friday following the date of the decree.
_____ will be responsible for the first _____ of uninsured medical expenses for the minor child(ren). Thereafter, Father shall be responsible for _____% of uninsured medical expenses, and Mother shall be responsible for _____% of uninsured medical expenses for the minor child(ren).
9. The parties have agreed on the following provisions for health insurance maintenance:
_____ shall maintain medical, dental, and optical insurance as available through employment on the minor child(ren).
10. The parties have agreed on the following arrangement for claiming the tax credits, exemptions, and deductions for the minor child(ren):
_____ **Petitioner** shall be entitled to claim the minor child(ren) for federal, state, and local income tax purposes on an annual basis; Respondent shall sign all necessary documents that will entitle Petitioner to do so.
_____ **Respondent** shall be entitled to claim the minor child(ren) for federal, state and local income tax purposes on an annual basis; Petitioner shall sign all necessary documents that will entitle Respondent to do so.
_____ **Petitioner and Respondent** shall each be entitled to claim the minor child(ren) for federal, state and local income tax purposes in alternating years; Petitioner shall be entitled to claim the minor child(ren) in the year _____, and every _____ (odd/even) year.
_____ Other: _____

11. The parties have agreed on the following debt division:

_____ The parties have already divided their debts.

_____ **Petitioner** will be solely responsible for and shall hold Respondent harmless from the following debts:

Name of Creditor	Amount of Debt
_____	_____
_____	_____

Respondent will be solely responsible for, and shall hold Petitioner harmless from the following debts:

Name of Creditor	Amount of Debt
_____	_____
_____	_____

12. The parties have agreed on the following vehicle division:

_____ There are no vehicles to divide.

_____ **Petitioner** will have sole possession of the following vehicles, and Respondent shall execute all documents necessary to transfer title of said vehicles within thirty (30) days of the date of this Order.

_____ **Vehicle #1, Make, Model and Year**

_____ **Vehicle #2, Make Model and Year**

_____ **Respondent** will have sole possession of the following vehicles and Petitioner shall execute all documents necessary to transfer title of said vehicles within thirty (30) days of the date of this Order:

_____ **Vehicle #1, Make, Model and Year**

_____ **Vehicle #2, Make Model and Year**

13. The parties have agreed on the following property division:

_____ The parties have already divided all items of property.

_____ **Petitioner** will have sole possession of the following items of property:

_____ **Respondent** will have sole possession of the following items of property:

14. The parties have agreed upon the following real estate division:

_____ The parties do not own any real estate.

_____ The **Petitioner** will have the following real estate and be responsible for any indebtedness on the property: Respondent agrees to execute any documents necessary for the transfer of right, title and interest in said real estate.

_____ The **Respondent** will have the following real estate and be responsible for any indebtedness on the property. Petitioner agrees to execute any documents necessary for the transfer of right, title and interest in said real estate.

Other: _____

15. The marriage has suffered an irretrievable breakdown and should be dissolved.

16. Change of last name:

_____ REQUESTING change of last name to: _____.

_____ NO last name change requested

The parties have disclosed all relevant documents and exchanged all information on value of property, pensions, real estate and other assets and debts. The parties agree that this division of property is/is not an approximate equal division of the assets and debts. The parties agree that if this division is not a nearly equal division, that the deviation from the presumptive equal division should be accepted by the Court because it is the parties' agreement and neither party has been forced or threatened to accept this agreement.

I affirm under the penalties of perjury that the foregoing representations are true.

Petitioner's Signature

STATE OF INDIANA)
) SS:
COUNTY OF _____)

Before me, _____ a notary public in and for _____
County, State of Indiana, personally appeared _____, and he/she
being first duly sworn upon his/her oath, says that the facts alleged in the foregoing instrument
are true.

Date: _____

Notary Public

MY COMMISSION EXPIRES:

Spouse's Signature

STATE OF INDIANA)
) SS:
COUNTY OF _____)

Before me, _____ a notary public in and for _____
County, State of Indiana, personally appeared _____, and he/she
being first duly sworn upon his/her oath, says that the facts alleged in the foregoing instrument
are true.

Date: _____

Notary Public

MY COMMISSION EXPIRES:

IT IS THEREFORE ORDERED by the Court that the parties' marriage is hereby dissolved
and the terms of their agreement as set out above shall be incorporated into the Order.

Date

Judge, Vermillion Circuit Court

VERMILLION COUNTY CHILD SUPPORT INFORMATION SHEET

CAUSE NO: 83C01- _____ - _____ - _____

PERSON RECEIVING SUPPORT PAYMENTS

Relationship to Child: _____

Name: _____ Other Names: _____ M/F _____ Race _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ - _____ - _____ Soc. Security No.: _____ - _____ - _____

Telephone No.: _____ - _____ - _____

PERSON PAYING SUPPORT

Relationship to Child: _____

Name: _____ Other Names: _____ M/F _____ Race _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Date of Birth: _____ - _____ - _____ Soc. Security No.: _____ - _____ - _____

Telephone No.: _____ - _____ - _____

CHILD(REN) INFORMATION

Name: _____ M/F _____ Race _____

Date of Birth: _____ - _____ - _____ Soc. Security No.: _____ - _____ - _____

Name: _____ M/F _____ Race _____

Date of Birth: _____ - _____ - _____ Soc. Security No.: _____ - _____ - _____

Name: _____ M/F _____ Race _____

Date of Birth: _____ - _____ - _____ Soc. Security No.: _____ - _____ - _____

Name: _____ M/F _____ Race _____

Date of Birth: _____ - _____ - _____ Soc. Security No.: _____ - _____ - _____

IF YOUR ADDRESS/PHONE # CHANGES AT ANYTIME, CALL 765-492-5350 TO UPDATE!