| IN THE FAMILY COURT OF                                                                                                                                                                                                                 |                        |               | COU                            | NTY, WEST VIRGINIA          |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------|---------------|--------------------------------|-----------------------------|
| IN RE:                                                                                                                                                                                                                                 | Civil Action No.:      |               |                                |                             |
| The Marriage/Children of:                                                                                                                                                                                                              |                        |               |                                |                             |
| Petitioner (First/Middle/Last)                                                                                                                                                                                                         | and                    | Responde      | Respondent (First/Middle/Last) |                             |
| PETIT                                                                                                                                                                                                                                  | TION FOR MODII         | FICATION      | 1                              |                             |
| 1. General Information                                                                                                                                                                                                                 |                        |               |                                |                             |
| a. The Petitioner is                                                                                                                                                                                                                   |                        |               | , who                          | is                          |
| the parent/spouse whose name i                                                                                                                                                                                                         |                        |               |                                |                             |
| or other person, whose relations                                                                                                                                                                                                       | ship to the Responden  | t/children is | 3                              |                             |
| b. The Petitioner requests that the Order Parenting Plan Child Support Spousal Support                                                                                                                                                 | er entered on the date | of /          | /                              | be modified with regard to: |
| Other ( <i>Explain</i> ):                                                                                                                                                                                                              |                        |               |                                |                             |
| 2. I want the Court to modify the Order Increase Child Support Decrease Child Support End Child Support Change Parenting Plan with reg decision making; time spent with the children other (Explain):  Order child support paid to ano | gards to:              |               |                                |                             |
| Order child support paid by and                                                                                                                                                                                                        | other person, who is   |               |                                |                             |
| Increase Spousal Support Decrease Spousal Support End Spousal Support                                                                                                                                                                  |                        |               |                                |                             |
| Other modification request(s) (I                                                                                                                                                                                                       | Explain):              |               |                                |                             |

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| (Ex | plain <u>all</u> of the <u>changes</u> in circumstances you think justify the modifications you requested.)              |  |  |  |  |
|-----|--------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| Inf | ormation concerning Public Assistance and Child Support Enforcement Services                                             |  |  |  |  |
| a.  | A Public Assistance Check from Health and Human Services is now being received by                                        |  |  |  |  |
|     | the Children;                                                                                                            |  |  |  |  |
|     | the Petitioner, and/or;                                                                                                  |  |  |  |  |
|     | the Respondent.                                                                                                          |  |  |  |  |
| b.  | A Public Assistance Check from Health and Human Services was received in the past by                                     |  |  |  |  |
|     | the Children;                                                                                                            |  |  |  |  |
|     | the Petitioner; and/or                                                                                                   |  |  |  |  |
|     | the Respondent.                                                                                                          |  |  |  |  |
| c.  | Services from the Bureau for Child Support Enforcement have been applied for by                                          |  |  |  |  |
|     | the Petitioner; and/or                                                                                                   |  |  |  |  |
|     | the Respondent.                                                                                                          |  |  |  |  |
| d.  | Income withholding services are currently being received from the Bureau for Child Support Enforcement                   |  |  |  |  |
| Inf | ormation concerning Child Protective Services (CPS) and other court cases.                                               |  |  |  |  |
| a.  | Child Protective Services is currently providing services to the child(ren) and parties in this case.                    |  |  |  |  |
| b.  | Child Protective Services is currently investigating allegations of abuse and/or neglect of the child(ren) in this case. |  |  |  |  |
| c.  | Someone other than the parents currently has custody of the child(ren) in this case.                                     |  |  |  |  |
| d.  | The parents are involved in another court case involving the custody of the child(ren) in this case.                     |  |  |  |  |
| e.  | The child(ren) is/are involved in another court case such as a juvenile delinquency or status offender case              |  |  |  |  |
|     |                                                                                                                          |  |  |  |  |
|     |                                                                                                                          |  |  |  |  |
|     |                                                                                                                          |  |  |  |  |
|     |                                                                                                                          |  |  |  |  |
|     | er's Signature Date                                                                                                      |  |  |  |  |

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Petitioner's Signature

## You <u>must</u> sign the Verification below <u>before a Notary Public</u>.

| VERIFICATION                                                                                                       |                                                                           |                     |  |  |  |
|--------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|---------------------|--|--|--|
| I,truth, say that the facts I have stated in this Motion are and if I have provided information given to me by oth | e true to the best of my personal kn                                      | owledge and belief; |  |  |  |
| Signature                                                                                                          |                                                                           | Date                |  |  |  |
| This Verification was sworn to or affirmed before me                                                               | on the day of                                                             | ,20                 |  |  |  |
| Nota                                                                                                               | ry Public/Other Official                                                  |                     |  |  |  |
| My commission expires:                                                                                             |                                                                           |                     |  |  |  |
| CERTIFICAT                                                                                                         | E OF SERVICE                                                              |                     |  |  |  |
| County of,  I,,  (Print your name here)  Mailed the Motion, together with any attached docum                       | the person making this Motion for<br>ents, by first class United States M |                     |  |  |  |
| (Opposing party)                                                                                                   |                                                                           | , at the address of |  |  |  |
|                                                                                                                    |                                                                           |                     |  |  |  |
| (Opposing party)                                                                                                   | s address)                                                                |                     |  |  |  |
| On the, 20                                                                                                         |                                                                           |                     |  |  |  |
|                                                                                                                    |                                                                           |                     |  |  |  |
| Signature                                                                                                          | Date                                                                      |                     |  |  |  |

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