IN THE SUPERIOR COURT OF _____ COUNTY
STATE OF GEORGIA

_____ ,
Petitioner,

vs.

_____ ,
Respondent.

Civil Action

Case Number

PETITION FOR LEGITIMATION AND CUSTODY/VISITATION

My name is _____. I am the Petitioner in this legitimation action and am representing myself. In support of my case, I state as follows:

1. The Respondent is named _____ and is [***Check only one*** *of the following*]:

☐ (a) the mother of my child(ren)

☐ (b) the legal guardian of my child(ren)

☐ (c) the legal custodian of my child(ren).

2. **Jurisdiction and Venue:**
[***Check only one*** *of the following*]

☐ (a) The Respondent is a resident of _____ County, Georgia.

☐ (b) The Respondent resides in _____ County, Georgia and I am a resident of _____ County. The Respondent has acknowledged service of process and has consented to the jurisdiction and venue of this Court.

☐ (c) the Respondent resides outside the State of Georgia in _____, but I reside in _____County, Georgia and my child(ren) reside(s) in Georgia.

☐ (d) the Respondent resides outside the State of Georgia in_____, but my child(ren) reside(s) in _____ County, Georgia.

☐ (e) the Respondent's whereabouts are unknown to me, but I am a resident of _____ County and my child(ren) reside(s) in Georgia. I am filing along with this Petition an Affidavit of Due Diligence and incorporating it herein by reference.

☐ (f) the Respondent's whereabouts are unknown to me, but my child(ren) reside(s) in _____County, Georgia. I am filing along with this Petition an Affidavit of Due Diligence and incorporating it herein by reference.

3. **Service of Process:** The Respondent shall be served as provided under O.C.G.A. Section 9-11-4 in the following manner: [***Check only one*** *of the following*]

☐ (a) The Respondent may be served by the Sheriff's Department at the Respondent's residence or work address, which is:

_____

_____

_____

☐ (b) The Respondent has acknowledged service of process. I am filing with this Petition an Acknowledgment of Service, which has been signed by the Respondent before a notary public.

☐ (c) The Respondent's whereabouts are unknown to me. I am filing with this Petition my Affidavit of Due Diligence. The Respondent shall be served by publication as provided under O.C.G.A. Section 9-11-4(e)(1) for those who cannot be found within the State of Georgia. To the best of my knowledge, information and belief, Respondent's last known address was:

_____

_____

_____

4. **Minor Child(ren):**
I am the father of the following _____ minor child(ren), born out of wedlock:

Name of Child	*M/F*	*Date of Birth*	*Lives with (mother, father, other)*
Name of Child	*M/F*	*Date of Birth*	*Lives with (mother, father, other)*

5. **Child(ren)'s Current Residence:**
The minor child(ren) currently live at _____
in _____ County, with the following adult: _____.
The child(ren) has/have lived at this address since approximately _____.

6. **Child(ren)'s Past Residences:**
During the past five years, the child(ren) has/have lived at the following addresses:

Address	*Dates at Address*

7. **Adults With Whom Child(ren) Has/Have Lived:**
During the past five years, the child(ren) has/have lived with the following adults:

Name of Adult	*Current Address*

8. **O ther Court Cases Involving Child(ren):**
[***Check only one*** *of the following*]

☐ (a) I have never participated as a party or a witness or in any other capacity in any other litigation concerning the custody of or visitation with the minor child(ren) in this or any other state or jurisdiction.

☐ (b) I have participated in other litigation concerning the custody of or visitation with the minor child(ren) in Georgia or another state. The court, case number, and date of any order concerning custody or visitation under the other litigation are as follows: _____

_____

_____.

9. **Other Cases That Could Affect Custody or Visitation in This Case:**
[***Check only one*** *of the following*]

☐ (a) I do not have any information of any proceeding that could affect this case, including proceedings for enforcement and proceedings relating to family violence, protective orders, termination of parental rights and adoptions, in this or any other state or jurisdiction.

☐ (b) I have information about a proceeding that could affect this case, including proceedings for enforcement and proceedings relating to family violence, protective orders, termination of parental rights and adoptions, in this or any other state or jurisdiction. The court, case number, and nature of the proceeding are as follows:_____

_____

_____.

10. **Others Claiming Custody or Visitation:**
[***Check only one*** *of the following*]

☐ (a) I do not know of any person who is not a party to this case who has physical custody of the child(ren) or who claims to have custody or visitation rights with respect to the child(ren).

☐ (b) I know of a person who is not a party to this case who has physical custody of the child(ren) or who claims to have custody or visitation rights with respect to the

child(ren). The names and the present addresses of the/these person(s) are:

_____

_____

_____.

11. I want to legitimate my relationship with my child(ren).

☐ 12. I want to change the name of my child(ren) from:

_____ to _____

_____ to _____

_____ to _____

_____ to _____

_____ to _____

☐ 13. I seek to have my name entered as the father on the birth record of my child(ren).

14. **Child Custody:**
[*Check and complete **only one** of the following*]

I believe the following custody arrangement is in the best interests of the child(ren):

☐ (a) The _____ should have full custody.

☐ (b) The Petitioner and the Respondent should share joint legal custody, with primary physical custody to the _____.

☐ (c) _____

_____

_____.

☐ (d) I am not asking the Court to address the issue of custody in this case.

15. **Child Visitation:**

[*Check and complete **only one** of the following*]

I believe that the following visitation arrangement is in the best interests of the child(ren):

☐ (a) The _____ should have reasonable visitation.

☐ (b) Visitation by the _____ should be limited in the following way and for the following reasons: _____

_____

_____

16. **Child Support:**
[*Check and complete **only one** of the following*]

☐ (a) The Respondent has income, or is capable of earning sufficient money, to support the minor child(ren). Based on the Respondent's gross income of $_____ per month, and the Georgia child support guidelines (O.C.G.A. Section 19-6-15), the Respondent should pay an amount of $_____ per month as support.

☐ (b) Based on my gross income of $_____ per month, and the Georgia child support guidelines (O.C.G.A. Section 19-6-15), I can pay to the Respondent as the primary custodial parent the amount of $_____ per month in child support.

☐ (c) The issue of child support cannot be decided in this action because this Court does not have personal jurisdiction over the Respondent.

☐ (d) I am not asking the Court to address the issue of support in this case.

17. **Health Insurance for Child(ren):**
[*Check and complete **only one** of the following*]

☐ (a) The Respondent should be ordered to maintain a policy for medical, dental and hospitalization insurance for the minor child(ren).

☐ (b) I already provide health insurance for the child(ren) and the Respondent should be required to reimburse me for a fair share of the cost of such insurance each month.

☐ (c) The issue of health insurance cannot be decided in this action because this Court does not have personal jurisdiction over the Respondent.

☐ (d) I am not asking the Court to address the issue of health insurance in this case.

18. **Other Medical Expenses for the Child(ren):**
[*Check and complete **only one** of the following*]

☐ (a) The Respondent should be required to be responsible for all expenses incurred for the medical, dental and hospitalization insurance for the minor child(ren) not covered by insurance.

☐ (b) The Respondent and I should share the cost of all expenses incurred for the medical, dental and hospitalization insurance for the minor child(ren) not covered by insurance.

☐ (c) The issue of health care expenses cannot be decided in this action because this Court does not have personal jurisdiction over the Respondent.

☐ (d) I am not asking the Court to address the issue of health care expenses in this case.

19. **Life Insurance to Support Child(ren):**
[*Check and complete **only one** of the following*]

☐ (a) The child(ren) depend(s) on the Respondent for support, and therefore the Respondent should be required to maintain a policy of insurance on the Respondent's life, with a face amount of $ _____, for the benefit of the minor child(ren). The Respondent should maintain the policy for so long as the child (or at least one of the children) is a minor or otherwise entitled to child support.

☐ (b) The issue of life insurance for the child(ren) cannot be decided in this action because this Court does not have personal jurisdiction over the Respondent.

☐ (c) I am not asking the Court to address the issue of life insurance for the child(ren) in this case.

FOR THESE REASONS, I REQUEST THE FOLLOWING RELIEF FROM THE COURT:
[*Check and complete all boxes that apply, but no others*]

☐ (a) That a DNA test be performed to confirm the child is in fact my biological child;

☐ (b) That the Court enter an Order legitimating my relationship with the child(ren) sothat the child(ren) and I will be capable of inheriting from each other in the same manner as if the child(ren) had been born in wedlock;

☐ (c) That the child(ren)s name(s) be changed to: _____;

_____; _____;

_____; _____;

☐ (d) That the Department of Vital Statistics be ordered and directed to amend the birth records of each child and reissue a birth certificate showing me, the Petitioner, as the father and (if applicable) changing each child's name as requested above;

☐ (e) That custody and visitation for the child(ren) be ordered in accordance with the Petitioner's requests in Paragraphs 14 and 15 of this Petition;

☐ (f) That child support, health insurance, medical expenses and life insurance be ordered in accordance with the Petitioner's requests in Paragraphs 16, 17, 18 and 19 of this Petition;

☐ (g) That the Respondent be served with notice of this Petition as provided by law;

☐ (h) That a Rule Nisi be scheduled by the Court to decide on the relief I have requested.

☐ (i) That the Court order the parties to participate in mediation to try to resolve any disputed issues in this matter;

☐ (j) That the Court order any and all other relief that it finds appropriate under the circumstances.

Dated:

_____

Petitioner, *Pro se* *(Signature)*

Name: _____

Address: _____

_____

Phone Number: _____