
Name

Mailing Address

City, State Zip Code

Phone Number Email

- Petitioner (without attorney/advocate)
- Respondent (without attorney/advocate)
- Attorney/Advocate for _____

IN THE TRIBAL COURT OF THE CONFEDERATED SALISH AND KOOTENAI TRIBES
OF THE FLATHEAD RESERVATION, PABLO, MONTANA

<input type="checkbox"/> In re the Marriage of: <input type="checkbox"/> In re the Parenting concerning: _____, Petitioner: _____ and Respondent: _____	Cause No. _____ <p style="text-align: center;">VERIFIED MOTION TO AMEND PARENTING PLAN</p>
--	--

NOTE: If you need **more space** than is provided, attach additional pages and indicate the corresponding paragraph that goes with the attachment. **You must fill out the entire form.** If a section does not apply, put "N/A" (not applicable).

The Petitioner Respondent states the following in support of amending the court ordered Parenting Plan, entered on _____ (date) in Cause No. _____.

1. Information about Petitioner: Check if in Military

Full Legal Name: _____ Date of Birth: _____

Mailing Address: _____ Apt. No. _____

Physical Address: _____

Primary Phone No. _____

Length of Residence on Flathead Reservation: _____ (Years/Months)

Dates: _____

Petitioner is is not a member of a federally recognized tribe.

Tribal Affiliation: _____ Enrollment Number: _____

Petitioner has the following relationship with the minor child(ren):

- Child(ren)'s Mother
- Child(ren)'s Father
- Other (please specify): _____

2. Information about Respondent: Check if in Military

Full Legal Name: _____ Date of Birth: _____

Mailing Address: _____ Apt. No. _____

Physical Address: _____

Primary Phone No. _____

Length of Residence on Flathead Reservation: _____ (Years/Months)

Dates: _____

Respondent is is not a member of a federally recognized tribe.

Tribal Affiliation: _____ Enrollment Number: _____

Respondent has the following relationship with the minor child(ren):

- Child(ren)'s Mother
- Child(ren)'s Father
- Other (please specify): _____

3. Minor Child(ren)'s Information:

Full Legal Name: _____ Date of Birth: _____

Mailing Address: _____ Apt. No. _____

Physical Address: _____

Primarily lives with: _____

Primary Phone No. _____

Length of Residence on Flathead Reservation: _____ (Years/Months)

Dates: _____

Minor child is is not a member of a federally recognized tribe.

Tribal Affiliation: _____ Enrollment Number: _____

Full Legal Name: _____ Date of Birth: _____

Mailing Address: _____ Apt. No. _____

Physical Address: _____

Primarily lives with: _____

Primary Phone No. _____

Length of Residence on Flathead Reservation: _____ (Years/Months)

Dates: _____

Minor child is is not a member of a federally recognized tribe.

Tribal Affiliation: _____ Enrollment Number: _____

4. **Jurisdiction.** This Court ordered a final parenting plan in this action and has continuing jurisdiction pursuant to CSKT Laws Codified, § 1-2-104(1).

The last order regarding the Parenting Plan was entered on _____ (date) in Cause No. _____, Jurisdiction _____.

Copies of the Court's Order Adopting Parenting Plan and the Parenting Plan are attached to this Motion (required).

5. **Cases Involving Child(ren).** I/We have participated in the following proceeding(s) regarding the child(ren) as a party or a witness, or in any other capacity concerning issues of custody/allocation of decision-making, or visitation/parenting time with the child(ren). Identify name of court, case number, jurisdiction, date, and type of proceeding if any.

Name of Court	Case Number	Jurisdiction	Date of Proceeding	Type of Proceeding

6. **Other Court Cases.** The following proceeding(s) that could affect the current proceeding including, but not limited to proceedings for Dissolution of Marriage, Legal Separation, enforcement of Court orders, domestic violence or domestic abuse, protection/restraining orders, criminal cases, child support, termination of parental rights, and adoptions. Identify name of court, case number, state, date and type of proceeding.

Name of Court or Agency	Case Number	Jurisdiction	Date of Proceeding	Type of Proceeding

9. Required Notice of Prior Protection/Restraining Orders

Have any type of Protection/Restraining Orders to prevent domestic abuse been issued against either party within two (2) years prior to the filing of this Motion? No Yes

If your answer was **Yes**, complete the following:

The Protection/Restraining Order was issued against _____ in a _____ in the County of _____, State of _____, in case number _____ on _____ (date).

Explain the type and subject matter of the Protection Order:

10. Child Support

a. Is there a child support case with Tribal Child Support Enforcement Program (TCSEP) or any other child support entity? No Yes

If **Yes**, identify the jurisdiction and case number: _____

If **No**, please indicate if you plan to contact TCSEP to establish child support consistent with the Tribal Child Support Guidelines and Schedule as recommended by TCSEP.

No Yes

b. Do you plan to request a modification of child support with this Motion? No Yes

If **Yes**, please indicate if you have contacted TCSEP to modify child support consistent with the Tribal Child Support Guidelines and Schedule as recommended by TCSEP.

No Yes

If **No**, please indicate when you plan to contact TCSEP to modify child support consistent with the Tribal Child Support Guidelines and Schedule as recommended by TCSEP: _____

11. Request. I request the Court to:

- Change our court-ordered, final Parenting Plan and adopt my Proposed Parenting Plan filed with this Motion;
- Require both parties to attend mediation and report the results to the Court within _____ days.
- Order any other relief the as the Court deems just and necessary under the circumstances.

-
- By checking this box, I am acknowledging I am filling in the blanks and **not** changing anything else on the form.
 - By checking this box, I am acknowledging that I have made a change to the original content of this form.
-

RESPECTFULLY submitted this _____ day of _____, 20__ by:

 Signature of: Petitioner Respondent
 Attorney/Advocate for _____

VERIFICATION AND ACKNOWLEDGMENT

I, _____, swear/affirm under penalty of perjury that I have read the foregoing document and that the information provided set forth therein is true and correct to the best of my knowledge.

 Signature

 Date

Subscribed and sworn to or affirmed before me at _____, Montana on the ____ day of _____, _____.

(SEAL)

 Clerk of Court, Notary Public or other person authorized to administer oath.

My commission expires: _____

CERTIFICATE OF MAILING

I, _____, do hereby certify that a true and accurate copy of the **MOTION TO AMEND PARENTING PLAN** was filed with the Court and simultaneously mailed to the opposing parties on this ____ day of _____, 20__, at the addresses given below.

 Signature