

STATE OF WYOMING)
) ss
COUNTY OF _____)

IN THE DISTRICT COURT

_____ JUDICIAL DISTRICT

Petitioner: _____,)
(Print name of person filing))

Civil Action Case No. _____

vs.)

Respondent: _____)
(Print name of other party)

**AFFIDAVIT FOR MODIFICATION OF CUSTODY AND SUPPORT WITHOUT
APPEARANCE OF PARTIES**

(Only use if the parties have reached an agreement and both have signed the *Order Modifying Custody and Support* **or** if either party defaulted and all default paperwork has been presented to the court and an *Entry of Default* issued.)

STATE OF WYOMING)
) ss.
COUNTY OF _____)

_____, being first duly sworn, deposes and says:
(Print Name)

1. I am the ☐ Petitioner OR ☐ Respondent in the case.
2. Petitioner is currently a resident of _____ County, State of _____.
3. Respondent is currently a resident of _____ County, State of _____.
4. Petitioner and Respondent are the parents, either natural or adoptive, of child(ren) who are either under 18 years of age, between the ages of 18 and 20 years and still in high school or a program equivalent to high school, or prevented from supporting him/herself due to a mental, emotional or physical impairment.

Child's Initials: _____ Year of Birth: _____

Child's Initials: _____ Year of Birth: _____

Child's Initials: _____ Year of Birth: _____

Child's Initials: _____ Year of Birth: _____

5. A material change in circumstances exists and it is in the best interest of the child(ren) to modify custody. Please describe the material change in circumstances:_____

6. The *Order Modifying Custody and Support* sets forth provisions for child custody, visitation, parental decision-making and child support that I believe is in our child(ren)'s best interest(s). In support of this statement, I provide the following evidence, under oath and to the best of my information and belief. Please address as many of the following factors as possible in your explanation of why the *Order* serves the child(ren)'s best interests:

(i) The quality of the relationship each child has with each parent:_____

(ii) The ability of each parent to provide adequate care for each child throughout each period of responsibility, including arranging for each child's care by others as needed:_____

(iii) The relative competency and fitness of each parent:_____

(iv) Each parent's willingness to accept all responsibilities of parenting, including a willingness to accept care for each child at specified times and to relinquish care to the other parent at specified times:_____

(v) How the parents and each child can best maintain and strengthen a relationship with each other: _____

(vi) How the parents and each child interact and communicate with each other and how such interaction and communication may be improved:_____

(vii) The ability and willingness of each parent to allow the other to provide care without intrusion, respect the other parent's rights and responsibilities, including the right to privacy:_____

(viii) Geographic distance between the parents' residences:_____

(ix) The current physical and mental ability of each parent to care for each child:_____

(x) Any other factors you want the court to consider necessary and relevant:_____

(xi) The law requires the court to consider evidence of spousal abuse (domestic violence) or child abuse as being contrary to the best interest of the children. Please state whether or not there has been any domestic violence or abuse in the relationship and whether the Decree adequately makes arrangements for visitation that best protects the child(ren) and the abused party from further harm:_____

I request the Court order a modification of custody and support.

Signature

Printed Name: _____

Address: _____

Phone Number: _____

Subscribed and sworn to before me by _____ on this
_____ day of _____, 20____.

Witness my hand and official seal.

Notarial Officer / Court Clerk

My Commission Expires:

CERTIFICATE OF SERVICE

I certify that on _____ (date) the original of this document
was filed with the Clerk of District Court; and, a true and accurate copy of this document
was served on the other party by ☐ Hand Delivery OR ☐ Faxed to this number _____
_____ OR ☐ by placing it in the United States mail, postage pre-paid, and
addressed to the following:

(Print Respondent/Respondent's Attorney's Name and Address)

TO: _____

Your signature

Print name