Sta	te of Minnesota		<b>District Court</b>
Cou	nty	Judicial District:	
		Court File Number:	
		Case Type:	Family
In Re	e the Marriage of:		
Name	e of Petitioner		
and		Affidavit in Re Motion to Cha	
Name	e of Respondent		
	ΓΕ OF MINNESOTA  ) SS  NTY OF(County where Affidavit signed)		
My f	ull name is		and I state
that:			
1.	I am the ( <i>check one</i> ): ☐ Petitioner ☐ Rethis <i>Affidavit</i> in response to the other party to the child(ren) is:	s Motion to Change C	
2.	A child protection case involving any or a	all of the children in thi	s case is open:   YES
	□ NO. If YES, this case is in	Count	y in the State of
	and the file number is		The child protection
	worker's name is		
	A copy of the <i>Order</i> is attached.		
3.	An <i>Order for Protection</i> involving me and	the other party and/or the	ne child(ren) exists:
	☐ Yes ☐ No. If YES, it is in		

, and the file number is	A copy of t	he
Order for Protection is attached.		
The child(ren) currently live with: ☐ Petitioner ☐ Resp	oondent, who is the child(ren)	's:
$\square$ Mother $\square$ Father $\square$ Other relation to the child(ren).		
is:	_ in the City of	_
in the State of	and zip code	<b>_</b> •
The child(ren) have lived at this address since the date of _		<u>-</u> ·
The current custody order is dated:		<u>_</u> .
The current order grants <b>legal</b> custody of the child(ren) as f	Collows:	
□ Sole legal custody to: □ Petitioner □ Respondent □ O	ther	
☐ Joint legal custody to: ☐ Both Parties ☐ Other		_
Legal custody identifies which parent(s) have the right to	o make decisions regarding t	he
upbringing of the child(ren) including education, health car	re and religious training.	
☐ I do not want to change <b>legal</b> custody.		
☐ I want to change <b>legal</b> custody to:		
☐ Sole legal custody in favor of	, or	
☐ Joint legal custody to both parents		
The current order grants <b>physical</b> custody of the child(ren)	as follows:	
□ Sole physical custody to: □ Petitioner □ Respondent □	] Other	
☐ Joint physical custody to: ☐ Both Parties ☐ Other		_
Physical custody identifies with whom the child(ren) will li		
Thysical castody facilities with whom the child(fell) will h	ive.	
☐ I do not want to change <b>physical</b> custody.	ive.	
	ive.	
☐ I do not want to change <b>physical</b> custody.		

If you	need more space, attach another full sheet of paper and mark it "Exhibit A."
I wan	t to change physical and/or legal custody, or modify a parenting plan pro
specif	ying the child's primary residence, because (check all that apply):
□ a.	A change of custody is in the best interests of the child(ren) and the
	previously agreed, in a writing approved by a court, to apply the best in
	standard in section 518.17 or 257.025 (Attach a copy of the court
	approving the agreement) and either: (check one)
	☐ i. Each party was represented by an attorney when the agreement
	approved by the court OR
	$\Box$ ii. The court made a finding in the Order approving the agreement to
	parties were fully informed, the agreement was voluntary, and the partie
	aware of its implications.
	hange of primary residence is in the best interests of the child(ren) because:
(Expla	ain in detail)

□ b.	Both parties have agreed that it is in the best interests of the minor child(ren) to change custody. <b>Attached is our signed and notarized agreement</b> . (Note: The Agreement MUST do more than just state that a change of custody is in the best interests of the child(ren). It MUST explain in detail HOW and WHY the change will be in the child(ren)'s best interests).
□ c.	The child(ren) has/have been living with me since (mo/day/year):  • The child(ren) came to live with me because (describe the reasons(s) the child(ren) came to live with me):
	The child(ren) has/have become integrated into my home in the following way(s) (give specific examples):
	<ul> <li>The child is living with me with the consent of the other parent (<i>check one</i>):</li> <li>□ YES □ NO. If YES, the other parent has said or done the following to make me believe that (s)he agrees that the child(ren) should live permanently with me (<i>be specific</i>):</li> </ul>
□ d.	My child(ren) is/are in danger if (s)he/they live(s) with the other parent.*  The other parent is putting the child(ren) in danger of physical or emotional harm by doing the following (give very specific facts and details):

		*If an extreme emergency exists, request an expedited hearing.
	□ e.	The other parent has persistently and willfully denied or interfered with my
		Court-ordered parenting time. The following is a list of each date, in the past six
		(6) months, that I was denied parenting time, and an explanation of exactly what
		the other parent did on each date to stop my parenting time:
12.		erstand that the Court cannot change custody unless there is a change in the astances of the child(ren) or the parents since the last custody <i>Order</i> . ( <i>Check one of</i>
	the fol	lowing):
	□ a.	The other party states at paragraph 11 of his/her <i>Affidavit</i> that there has been a change of circumstances. My response to that is:
	□ b.	I am asking the Court to order a change in custody. The following is a description
		of the changes that are a basis for modifying the most recent custody <i>Order</i> (be specific):

13.		erstand that moving a child to a different family and home can be stressful for the (Check one of the following):
		The other party is asking the Court to move the child(ren) to another family and home. My response is:
	□ b.	I want the Court to change physical custody from the other party to me. I believe that living with the other parent is more harmful to my child(ren) than the stress of moving to a new home and family because:
14.	and th	rstand that the Judge must decide custody based on what is best for my child(ren), at by filling in (a) through (k) of this paragraph 14, that I am giving the Judge nation needed to make that decision.  escribe the child(ren)'s physical, emotional, cultural, spiritual, and other needs.:
		be how the custody and parenting time arrangements you are asking the Court to will affect the child(ren)'s needs and development:
		escribe any special medical, mental health, or educational needs of the child(ren) ay require special parenting arrangements or access to recommended services:
	-	

c. Describe the custody arrangement the child(ren) want (the court will decide if the
chid(ren) is/are of sufficient ability, age, and maturity to state an independent and reliable
opinion):
d. There □ is/was □ is not/was not domestic abuse in my household or relationship
with the other parent. There □ is/was □ is not/was not domestic abuse in the other
parent's household. If there is or was domestic abuse, describe what happened, when the
abuse happened, and the situation surrounding the abuse.
acuse happened, and the steamen surrounding the acuse.
If there is/was abuse, describe how that abuse may affect parenting, and the child(ren)'s
safety, well-being, and developmental needs:
surety, well being, and developmental needs.
e. Describe any physical, mental, or chemical health issues you or the other parent may
have that affects the child(ren)'s safety or developmental needs (Chemical health issues
could mean issues with drugs, alcohol, or other illegal substances):
f. Describe what you have done in the past as well as each and every day to take care of
the child(ren):
Describe what the other parent has done in the past as well as each and every day to take
care of the child(ren):

Describe your willingness and ability to maintain consistent, ongoing care to the
child(ren) and to meet the ongoing developmental, emotional, spiritual, and cultural
needs of the child(ren):
Describe the other parent's willingness and ability to maintain consistent, ongoing care to
the child(ren) and to meet the ongoing developmental, emotional, spiritual, and cultural
needs of the child(ren):
g. Describe how any changes to home, school, and community have affected or may
affect the child(ren)'s well-being and development:
arreet the chira(ten) 5 went being and development.
h. Describe how the custody and parenting time you want the court to order will affect
the ongoing relationships between the child(ren) and each parent, siblings, and other
significant persons in the child(ren)'s life:
i. Describe how it will help the child(ren) to have as much parenting time with each
parent as possible and how it may harm the child(ren) if parenting time with either
parent is limited:

j. Describe what you do to encourage the child's relationship with the other parent and
permit frequent and continuing contact by the other parent with the child(ren) (except
when there is domestic abuse):
Describe what the other parent does to encourage or discourage your relationship and
contact with the child(ren):
k. Describe the willingness and ability of you and the other parent to cooperate in the
raising the child(ren). How will you and the other parent share as much information as
possible? How will you and the other parent work together to make sure the children are
exposed to as little conflict as possible?
Describe what methods you and the other parent plan to use for resolving disputes
regarding any major decisions concerning the life of the child(ren):
I want to respond to the other party's requests for parenting time in Paragraph 14 of
his/her Affidavit. My response is:

15.

16.		Court changes <b>physical</b> custody, the parenting time schedule should be changed all that apply and be as complete as possible.
		Changing the existing parenting time schedule to the following schedule:  Weekends:
		Week nights or after school:
		Holidays:
		School Release Days:
		Birthdays:
		Summer:
		School Holidays:
		Telephone Contact:
		Other:
	□ b.	Requiring supervised parenting time because:
		Parenting time should be supervised by:
		NOTE: You and the other party may have to pay a fee for each supervised visit.  Who should pay the fee?

	□ c.	Requiring the child(ren) be transferred <b>at a parenting time exchange center</b> if one is located in the area, and for both parties to follow all rules of the parenting time exchange center. NOTE: The parenting time exchange center may require the parties to pay a fee for such an exchange. Who should pay the fee?
	□ d.	Requiring that the child(ren) be transferred at:
		because
Curi	ent Info	rmation About Me
17.		urrently ( <i>check all that apply</i> ): rried □ Separated □ Divorced □ Living with a companion □ Single
18.	I am follow a. b. c. d. e. f. g. h. i.	currently (check one)
19.	Comm Annui Milita Spous	the following additional sources of income:  hissions \$Pension Payments \$  ty Payments \$Unemployment Benefits \$  ry / Naval Retirement \$Workers' Compensation \$  al Maintenance Received \$Disability Payments \$  mployment \$Other \$
20.	Minne	ive (check only if it applies)
21.	amour	int child(ren) currently receives monthly social security or veteran's benefits in the at of \$ based on $\square$ my disability $\square$ the other parent's disability paid to $\square$ me $\square$ other parent.

I sup	port the following nonjoin	nt child(ren):			
	***** TAT	D. 4 C D. 41.	D.L.C.	Child Support	Livi
Chi	ild's Name	Date of Birth	Relationshi	Monthly amt. \$	the Ye
				•	
				\$	Ye
				\$	Ye
				\$	Ye
				\$	Ye
	monthly expenses at the pehold expenses):	present time a	re as follows	Monthly Paymen	
				<b>Present Time</b>	
a.	☐ House payment or ☐			\$	
b.	Real Estate Taxes, if no			\$	
C.	Association Dues or Lo	ot Rent (for pro	perty)	\$	
d.	Insurance: Homeowners, it	f not included i	n (a)	\$	
	Car			\$	
	Life			\$	
e.	Utilities: (Average Mo	onthly Amount)		•	
	Gas			\$	
	Electricity Telephone			\$ \$	
	Water and garba	200		\$\$	
	Cable TV	age		\$\$	
f.	Food			\$ \$	
	Clothing			\$	
σ.	$\mathcal{E}$			\$	
	Laundry/dry cleaning			· <del></del>	
h.	Laundry/dry cleaning Personal allowances an	d incidentals		\$	
g. h. i. j.	Personal allowances an			\$ \$	
h.	Personal allowances an Magazine and newspap	oers	penses	·	
h. i. j.	Personal allowances an Magazine and newspap Uninsured / unreimburs	oers sed medical ex		\$	
h. i. j. k.	Personal allowances an Magazine and newspap	oers sed medical ex		\$ \$	
h. i. j. k. l.	Personal allowances an Magazine and newspap Uninsured / unreimburs Uninsured / unreimburs	oers sed medical expe sed dental expe		\$\$ \$\$	
h. i. j. k. l. m.	Personal allowances an Magazine and newspap Uninsured / unreimburs Uninsured / unreimburs Child care expenses	oers sed medical expe sed dental expe		\$\$ \$\$ \$\$ \$\$	
h. i. j. k. l. m.	Personal allowances an Magazine and newspap Uninsured / unreimburs Uninsured / unreimburs Child care expenses Transportation expense	oers sed medical expe sed dental expe		\$\$ \$\$ \$\$	

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	ο.	Recreation/Entertainment	\$
	p.	Child(ren)'s needs (sports/school/hobbies)	
	q.	Allowances	\$
	r.	Other (list)	\$
	s.	Charge accounts and loans (list):	<u> </u>
	ь.	Name of Account	Balance Owed
		1	\$
		2	Ф
		3	\$
		4	\$
		5	\$
		TOTAL MONTHLY EXPENSES:	\$
25.		following people help me pay my current mo pouse □ Companion □ Roommate(s)	
		pouse in Companion in Roommate(s)	E Relatives E 140 One
26.		value of the property I currently own by myse	elf or with someone else is:
		ne \$	
	Hou	sehold goods \$	
		chase price of my home \$	
	Bala	nnced owed on my home \$	
	Othe	er real estate \$	
	Che	cking/savings \$	
		omobiles \$ (year and	make)
		reational vehicles \$(	
		onal property \$	· ·
	Stoc	eks/bonds/etc. \$	
a	4 T	6 4 Al 404 B	
		formation About Other Parent	.1
27.		he best of my knowledge, the other parent is c	
		$(ck \ one) \square$ employed $\square$ unemployed $(if \ emp)$	
	a.	Employer:	
	b.	Address:	
	c.	Work telephone number:	
	d.	Occupation / Type of work:	
	e.	Length of employment:	
	f.	Supervisor: This □	
	g.	Gross Pay: \$ This □	does □ does not include overtime pay.
	ĥ.	Paid: ☐ Weekly ☐ Every other week ☐ 7	Twice a month $\square$ Monthly $\square$ Unknown
	i.	Previously employed by	·
		for years prior to the above	employment.
28.	To tinco	the best of my knowledge, the other parent	
			Pension Payments \$
		uity Payments \$	Unemployment Benefits \$
	731111	uity i ayments ψ	onemployment beliefits #

	Spousal Maintenance Receiv	/ed \$	Workers' Compensation \$ Disability Payments \$			
	Self-Employment \$		Other \$_			
29.	To the best of my knowledge, the other parent receives (check only if it applies) ☐ MFIF☐ Medical Assistance ☐ MinnesotaCare ☐ General Assistance ☐ SSI☐ Child Care Assistance					
30.	To the best of my knowled $(check\ one)$ $\square$ YES $\square$					
31.	To the best of my knowledge	e, the other paren	t supports the fo	llowing nonjoint   Child Support	child(ren): Living in	
	Child's Name	Date of Birth	Relationship	Monthly amt.	the home	
				\$	Yes/No	
				\$	Yes/No	
				\$	Yes/No	
				\$	Yes/No	
				\$	Yes/No	
32.	ts Health Care Coverage Inf About me: (check all that a la l	ry health care coverage arger have private my proportionate of health care caintain health capther nonjoint chie coverage for self coverage for dependence f	vailable for the j health care cov share of health coverage for the re coverage for ldren. or dental insuran	oint child(ren) erage available f care coverage f e joint child(ren) other nonjoint c ce coverage in p	or the joint should be hildren and lace for the	

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33.	Currently, there is:  □ no court order that directs either parent to carry private health care coverage for the joint child(ren).  □ a court order that directs □ me □ the other parent to carry private health care			
	coverage for the joint child(ren).  ☐ Medical Assistance ☐ MinnesotaCare currently in place for the joint child(ren).			
34.	About the other parent: (check all that apply)  ☐ The other parent is court ordered to carry health care coverage for the joint child(ren) ☐ The other parent has private health care coverage available for the joint child(ren) ☐ The other parent does not have or no longer has private health care coverage available for the joint child(ren) ☐ The other parent is court ordered to maintain health care coverage for other nonjoint children and coverage is in place for other nonjoint children. ☐ The other parent has private health care coverage and/or dental insurance coverage in place for the following people:			
	Cost of monthly health care coverage for self: \$ Cost of monthly health care coverage for dependents: \$ Cost of monthly dental insurance for self (if separate coverage from health care coverage): \$ Cost of monthly dental insurance for dependents (if separate coverage from health care coverage): \$			
Child 35.	Care Obligation  ☐ I am court ordered to pay a proportionate share of child care support and the amount of child care support has changed.  ☐ There is no court ordered child care obligation and I have child care expenses.			
36.	If there is an existing court order for monthly child care expenses, list the court ordered amount: \$			
37.	The <b>current</b> total monthly costs of child care are \$			
38.	At paragraph 7 or 9 of this <i>Affidavit</i> , I asked the Court for joint custody:  YES NO. (If NO, go to paragraph 39. If YES, fill in the rest of paragraph 38). I provide the following information to help the Judge decide if joint custody is appropriate:  a. Describe the ability of the parents to cooperate in rearing their child(ren):			

b.	Describe the methods parents have for working through disagreements regarding major decisions about the child(ren)'s life and their ability to use these methods:
c.	Describe whether it would be harmful to the child(ren) if one parent had total authority over the child's upbringing:
d.	Describe whether domestic abuse as defined in § 518B.01 has occurred between the parents:
	ollowing is additional information regarding the reasons I am requesting a change of y:
	ollowing is additional information regarding the reasons I disagree with the other is <i>Motion</i> :

-	
-	
correct. Minn. Stat. § 358.1	
Dated:	Signature
	Name:
	Address:
	City/State/Zip:
	City/State/Zip: Telephone: ( )
	Telephone: (_)  E-mail address: