

APPLICATION FOR WAIVER OF FAMILY COURT COUNSELING FEE

Your Name: _____ Case Number: _____

Name of other parent _____

1. I am paid *weekly every 2 weeks two times per month once per month* (circle one).
2. My gross paycheck (before taxes or other deductions) from employment \$_____.
3. I receive other monthly income totaling \$_____ from pension, disability, social security, educational grants, interest and dividends or unemployment compensation.
4. I receive child support and/or maintenance in the amount of \$_____ .
 weekly every two weeks two times per month monthly (check one)
5. I have cash assets in savings accounts, checking accounts or cash on hand in the total amount of \$_____. Complete Schedule A on back of form.
6. I have other assets over \$500 in value (stocks, bonds, automobile(s), retirement accounts, security, ownership in business). Complete Schedule B on back of form.
7. I have equity in real estate in the amount of \$_____. Equity is determined by taking the value of your real estate and subtracting the amount that you owe on that real estate.
8. The other party to this case and I are/are not still married. (Circle one). Our combined gross income is approximately \$_____ per month. (List combined income only if divorce is not finalized).
9. My household consists of myself and _____ others. Complete Schedule C on back of form.
10. The other members of my household have monthly income totaling \$_____.
11. I pay child support or maintenance in the amount of \$_____.
 weekly every two weeks two times per month monthly (check one)
12. I pay day care/child care expenses in the amount of \$_____.
 weekly every two weeks two times per month monthly (check one)

You must attach copies of your 3 most recent pay stubs from employment and a copy of your most recent tax return, with this application in order for it to be considered. If you are remarried, you must also attach copies of pay stubs and copies of the most recent tax return for your spouse, if you reside in the same household.

Under penalty of perjury, I swear that this is a true statement. I understand that if my financial situation changes, I must notify the court immediately.

Signature

Date

Subscribed & sworn to before me on _____

Notary Public / Court Official

My commission expires: _____

SCHEDULE A: CASH ASSETS	
Description of asset (e.g. savings, checking, money market)	Amount of asset

SCHEDULE B: OTHER ASSETS	
Description of asset (e.g. stocks, bonds, automobiles, retirement accounts)	Approximate value of asset

SCHEDULE C: HOUSEHOLD			
Name of person	Relationship to applicant (e.g., spouse, child, stepchild)	If child/stepchild, under age 18?	% of time in household
		Yes No	
		Yes No	
		Yes No	
		Yes No	
		Yes No	
		Yes No	
		Yes No	