# INSTRUCTIONS FOR COMPLETING THE PETITION FOR MODIFICATION (Form 6)

#### TYPE OR PRINT NEATLY

#### STEP 1 - The Caption

Fill in the names of the parties and the docket number exactly how they Appear on the custody court order.

#### STEP 2 - The Petition

- 1. You are the petitioner. Put your name on the line. Please list your current address and phone number.
- 2. The other party involved in the custody action is the respondent. Please list a valid/current address and phone number. This is the address that the scheduling order will be mailed to.
- 3. Put the date of the current custody order in the lines provided and attach a copy of the order to the back of your petition.
- 4. List who the children currently reside with and address.
- 5. Check the appropriate line indicating if the children and residential custodian have resided in Blair County or have not resided in Blair County.
- 6. Fill in the changes that have occurred that represent why you are requesting the court to modify the current custody order as well as your proposal for a new custody order.

#### STEP 3 - Signing The Petition

Sign both the request to modify and the statement of fact on the lines above petitioner.

#### STEP 4 - Copies

Make at least 3 copies of your petition. File the original and one copy with The Blair County Prothonotary Office and maintain one for your own Purposes.

#### STEP 5 - Filing Fee

- 1. You must submit a \$44.00 filing fee along with your petition for modification.
- 2. The fee must be in the form of a **check**, made payable to the Blair County Prothonotary, **money order** or **cash**.

These are general instructions and may not apply or be all you need to know to file a petition. Please seek legal advice if you are unsure of how to proceed.

# IN THE COURT OF COMMON PLEAS OF BLAIR COUNTY, PENNSYLVANIA

Plaintiff	)	NO.	
VS.	) ) )	CUSTODY	
Defendant	)		
PETIT	ION FOR MODIFICATI	ION OF A CUSTODY ORDER	
		, residing at	
(street)		(city)	<u></u>
(state)	(zip code)	(county)	
(State)		(E-Mail A	ddre
	(phone number)	\	
2. The Respondent is		residing at	
(street)		, residing at	
	(zip code)	(city)  (county)	,
(street)	(zip code)(phone numbe	(city) (county) er)(E-Mail A	 
(street)	(zip code) (phone numbe	(city) (county) er)(E-Mail A	,
(street) (state)  3. The Petitioner re	(zip code)(phone numbe espectfully represents to legal and physical cust		 

	with Plaintiff/Defendant.
During the last 6 months, th	he child(ren) and custodian: (Pick one)
Have resided in	
Have not resided	in BLAIR County. The child(ren) and the custodian have reside
<del></del>	addresses outside BLAIR County:
This Order should b	be modified because: (what do you want changed
	oner requests that the Court modify the existing Order becaus
WHEREFORE, Petition	oner requests that are obtained,
will be in the best interest of	the child(ren).
will be in the best interest of	the child(ren).
will be in the best interest of	
will be in the best interest of	the child(ren).  Petitioner
will be in the best interest of	Petitioner
will be in the best interest of	
will be in the best interest of	Petitioner (Print your name)
will be in the best interest of	Petitioner  (Print your name)  (Print your address)
will be in the best interest of	Petitioner (Print your name)
will be in the best interest of	Petitioner  (Print your name)  (Print your address)  (city) (state) (zip)
will be in the best interest of	Petitioner  (Print your name)  (Print your address)
	Petitioner  (Print your name)  (Print your address)  (city) (state) (zip)  Phone number
will be in the best interest of	Petitioner  (Print your name)  (Print your address)  (city) (state) (zip)  Phone number
I verify that the	Petitioner  (Print your name)  (Print your address)  (city) (state) (zip)  Phone number  statements made in this complaint are true and corrected the statements herein are made subject to the penalties of 18 Page 1
I verify that the	Petitioner  (Print your name)  (Print your address)  (city) (state) (zip)
I verify that the	Petitioner  (Print your name)  (Print your address)  (city) (state) (zip)  Phone number  statements made in this complaint are true and corrected the corrected the complaint are true and corrected the complaint are true and corrected the complaint are true and corrected the corrected the corrected the corrected the corrected the corrected the

IN THE COURT OF COMMON PLEAS OF BLAIR COUNTY, PENNSYLVANIA					
	Plaintiff vs.	T R T T T T T T T T T T T T T T T T T T		GN	
	Defendant	# # #			
	CRIMINAL RECORD	/ ABU	SE HISTORY	Y VERIFICATION	
l.			, hereb	oy swear or affirm,	subject to
penalties o	of law including 18 Pa				
authorities					
	Unless indicated by	my cl	necking the	box next to a cr	ime below,
	or any other member				
	oled no contest or w				
	vailable pursuant to t				
	crimes in Pennsylva				
	sdiction, including pe				
Check all that apply	<u>Crime</u>	<u>Self</u>	Other household member	Date of conviction, quilty plea, no contest plea or pending charges	Sentence
	18 Pa.C.S. Ch. 25 (relating to criminal homicide)				
	18 Pa.C.S. §2702 (relating to aggravated assault)				
	18 Pa.C.S. §2706 (relating to terroristic threats)				
	18 Pa.C.S. §2709.1 (relating to stalking	<u> </u>			

Check all that apply	<u>Crime</u> <u>Se</u>	other household member	Date of conviction, guilty plea, no contest plea or pending charges	<u>Sentence</u>
	18 Pa.C.S. §2901 (relating to kidnapping)		<del></del>	
	18 Pa.C.S. §2902 (relating to unlawful restraint)			
	18 Pa.C.S. §2903 (relating to false imprisonment)			
	18 Pa.C.S. §2910 (relating to luring a child into a motor vehicle or structure)		<u> </u>	
	18 Pa.C.S. §3121 (relating to rape)			
	18 Pa.C.S. §3122.1 (relating to statutory sexual assault)			<u>.</u>
	18 Pa.C.S. §3123 (relating to involuntary deviate sexual intercourse)			
	18 Pa.C.S. §3124.1 (relating to sexual assault)			
	18 Pa.C.S. §3125 (relating to aggravated indecent assault)			
	18 Pa.C.S. §3126 (relating to indecent assault)			
	18 Pa.C.S. §3127 (relating to indecent exposure			

<u>Check</u> <u>all that</u> <u>apply</u>	<u>Crime</u> <u>Self</u>	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	<u>Sentence</u>
	18 Pa.C.S. §3129 (relating to sexual intercourse with animal)			
	18 Pa.C.S. §3130 (relating to conduct relating to sex			
	offenders) 18 Pa.C.S. §3301 (relating to arson and related offenses)			
	18 Pa.C.S. §4302 (relating to incest)			
	18 Pa.C.S. §4303 (relating concealing death of child)			
	18 Pa.C.S. §4304 (relating to endangering welfare of children)			
	18 Pa.C.S. §4305 (relating to dealing in infant children)			
· .	18 Pa.C.S. §5902(b) (relating to prostitution and related offenses)			
	18 Pa.C.S. §5903(c) or (d) (relating to obscene and other sexual materials and performances)			
	18 Pa.C.S. §6301 (relating to corruption of minors)			
	18 Pa.C.S. §6312 (relating to sexual abuse of children)			

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. . . . .

Check all that apply	<u>Crime</u>	<u>Self</u>	Other household member	Date of conviction, guilty plea, recontest plea pending cha	<u>06</u>	<u>ntence</u>
	18 Pa.C.S. §6318 (relating to uniawful contact with minor)	<u> </u>				
	18 Pa.C.S. §6320 (relating to sexual exploitation of children)					
	23 Pa.C.S. §6114 (relating to contemp for violation of protection order or agreement)	<u></u>	name of the second			
	Driving under the influence of drugs or alcohol					
	Manufacture, sale, delivery, holding, offering for sale or possession of any controlled substal or other drug or d	nce evice				
2.	Unless indicated	by m	y checking t	the box ne	xt to an it	em below,
	I not any other me	mber (	of my housel	<u>nold have a</u>	history of	VIOLETTE OF
abusive	conduct, or involv	/emen	<u>t with a Chil</u>	dren & You	th agency	, including
the folio						
Check all that apply				<u>Self</u>	Other household member	<u>Date</u>
	A finding of abuse Agency or similar Pennsylvania or another jurisdic	ar agend similar	<u>cy in</u>			
	Abusive conduction from Pennsylvania o another jurisdic	<u>Abuse</u> r simila	Act in			
	involvement w Agency or sim Or another juri Other:	lar age	ncy in Pennsyva	ania 		

<u>Sentence</u>

. . . . .

3. Please list any evaluation, counseling or other treatment received
following conviction or finding of abuse:
4. If any conviction above applies to a household member, not a party, state that person's name, date of birth and relationship to the child.
5. If you are aware that the other party or members of the other party's household has or have a criminal/abuse history, please explain:
I verify that the information above is true and correct to the best of my knowledge, information or belief. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. §4904 relating to unsworn falsification to authorities.
Signature
Printed Name

COMMON PLEAS CASE MANAGEMENT SYSTEM

WEBSITE—CRIMINAL ONLY

GO TO: ujsportal.pacourts.us

THEN CLICK ON: Docket Sheets + Common Pleas Courts Then: Search Type + Participant

# INSTRUCTIONS FOR COMPLETING THE CUSTODY SCHEDULING ORDER

#### TYPE OR PRINT NEATLY

#### STEP 1 - The Caption

- Fill in the full legal name of the Plaintiff exactly as completed on the Custody Complaint
- 2. Fill in the full legal name of the Defendant exactly as completed on the Custody Complaint

# STEP 2 - The Scheduling Order

- Fill in the name of the Defendant to the custody action on the line provided.
- 2. Fill in the names and birthdays of all minor children that are subjects to the custody case on the Confidential Information Form first column. (204 Pa.Code § 213.81)

# 3. READ THE SCHEDULING ORDER

- 4. Write down the Children First Education Program telephone number and be prepared to register for the Program.
- 5. Be prepared for notification of the date and time of your Intake Conference that will be scheduled in approximately 30 days for the filing of the complaint.

# 6. DO NOT SIGN THE SCHEDULING ORDER

Plaintiff	: No
Vs.	Custody
Defendant	•
CUSTOD	Y SCHEDULING ORDER
You	(Respondent) have been sued in Court to
obtain custody, partial custody or supe	ervised physical custody of the child(ren) identified on th
Confidential Information Form first co	
***Do not list names and date of birth attached Confidential Information For	of children on this form, identify by initials corresponding m.
Child Child Child	Child
(List additional children as necessary	)
All parties of this custody action	on are hereby <b>ORDERED</b> to attend the Mandatory
All parties of this custody action.  Parent Education Children First Programmer.	on are hereby <u>ORDERED</u> to attend the Mandatory gram within forty –five (45) days of this order. All
All parties of this custody action Parent Education Children First Programmes are required to contact to	on are hereby <u>ORDERED</u> to attend the Mandatory  gram within forty –five (45) days of this order. All  the Children First Program at (814) 693-3292
All parties of this custody action.  Parent Education Children First Programmes are required to contact to within five (5) days of receipt of	on are hereby <u>ORDERED</u> to attend the Mandatory gram within forty—five (45) days of this order. All the Children First Program at (814) 693-3292 fithis order to register for said program.
All parties of this custody action Parent Education Children First Programmes are required to contact to within five (5) days of receipt of If you have already attended the Chil	on are hereby ORDERED to attend the Mandatory gram within forty—five (45) days of this order. All the Children First Program at (814) 693-3292 fithis order to register for said program.  Iddren First Program, you are not required to register again
All parties of this custody action Parent Education Children First Programmes are required to contact to within five (5) days of receipt of If you have already attended the Chil Should the moving party fail	on are hereby ORDERED to attend the Mandatory gram within forty—five (45) days of this order. All the Children First Program at (814) 693-3292 fithis order to register for said program. Idren First Program, you are not required to register again to pay fees or fail to appear for the Education
All parties of this custody action Parent Education Children First Programmes are required to contact to within five (5) days of receipt of If you have already attended the Chil Should the moving party fail	on are hereby ORDERED to attend the Mandatory gram within forty—five (45) days of this order. All the Children First Program at (814) 693-3292 fithis order to register for said program.  Iddren First Program, you are not required to register again
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All parties of this custody action Parent Education Children First Programties are required to contact to within five (5) days of receipt of the such party shall be forfeited.  Should the moving party fail such party shall be forfeited.  Should the non-moving party	on are hereby ORDERED to attend the Mandatory gram within forty—five (45) days of this order. All the Children First Program at (814) 693-3292 if this order to register for said program.  Iddren First Program, you are not required to register again to pay fees or fail to appear for the Education edismissed without prejudice and any fees paid by the fail to pay fees or fail to appear for the Education
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All parties of this custody action Parent Education Children First Programties are required to contact to within five (5) days of receipt of the such party shall be forfeited.  Should the moving party fail such party shall be forfeited.  Should the non-moving party	on are hereby ORDERED to attend the Mandatory gram within forty—five (45) days of this order. All the Children First Program at (814) 693-3292 if this order to register for said program.  Iddren First Program, you are not required to register again to pay fees or fail to appear for the Education edismissed without prejudice and any fees paid by the fail to pay fees or fail to appear for the Education where the fail to pay fees or fail to appear for the Education of the Education for Cause why such party should not be held in

Intake/Conciliation Conference with Lynn Yeager at the Blair County Courthouse, 423 Allegheny Street, Third Floor, Suite 327 Hollidaysburg, Pa. 16648.

If you fail to appear for the Intake Conference, Conciliation Conference or any other scheduled proceeding as provided by this Order, an Order for Custody, Partial Custody or Supervised Physical Custody may be entered against you or the Court may issue a Warrant for your arrest.

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER OR CANNOT AFFORD ONE, GO TO OR TELEPHONE THE OFFICE SET FORTH BELOW TO FIND OUT WHERE YOU CAN GET LEGAL HELP.

# IF YOU CANNOT AFFORD A LAWYER

### IF YOU DO NOT HAVE A LAWYER

# MIDPENN LEGAL SERVICES

205 Lakemont Park Blvd. ALTOONA, Pa. 16602 (800) -326-9177

#### <u>BLAIR COUNTY LAWYER</u> REFERRAL LAW LIBRARY

Third Floor, New Wing (3C) Blair County Court House Hollidaysburg, Pa. 16648 (814) 693-3090

## AMERICANS WITH DISIBILITIES ACT OF 1990

The court of Common Pleas of Blair County is required by law to comply with the Americans were Disabilities Act of 1990. For information about accessible facilities and reasonable accommodations available to disabled individuals having business before the Court, please contact (814) 693-3050. All arrangements must be made seventy-two (72) hours prior to any hearing or business before the Court You must attend the scheduled conference or hearing.

	BY THE COURT	
Date		J.

# CONFIDENTIAL INFORMATION FORM



## APPELLATE/TRIAL COURT CASE RECORDS

Public Access Policy of the Unified Judicial System of Pennsylvania:

Case Records of the Appellate and Trial Courts

204 Pa. Code § 213.81

www.pacourts.us/public-records

Party name as displayed in case caption)	Docket/Case No.	
Vs.		
Party name as displayed in case caption)	Court	
s form is associated with the pleading titl	ed	, dated,
rsuant to the Public Access Policy of the rial Courts, the Confidential Information w, ordered by the court, or otherwise names, shall remain confidential, except that is todian. This form, and any additional process.	Unified Judicial System of Pennsylvania Form shall accompany a filing where core ecessary to effect the disposition of a m	atter. This form, and any additional used of record, the court, and the
·	T. C. V. M. F	References in Filing:
This Information Pertains to:	Confidential Information: Social Security Number (SSN):	Alternative Reference:
(full name of adult)  OR  This information pertains to a minor with the initials of and the full name of (full name of minor)  and date of birth:	Financial Account Number (FAN):  Driver's License Number (DLN):  State of Issuance:  State Identification Number (SID):	Alternative Reference: FAN 1  Alternative Reference: DLN 1  Alternative Reference: SID 1
0.7.10	Social Security Number (SSN):	Alternative Reference: SSN 2
(full name of adult) OR	Financial Account Number (FAN):	Alternative Reference: FAN 2
This information pertains to a minor with the initials of and the full name of	Driver's License Number (DLN):	Alternative Reference: DLN 2
(full name of minor)	State of Issuance:	
and date of birth:	State Identification Number (SID)	Alternative Reference: SID 2

HHIS PORMUS CONTUDENCE AND

Rev. 12/2017

# CONFIDENTIAL INFORMATION FORM



### APPELLATE/TRIAL COURT CASE RECORDS

Additional page(s) attached.	total pages are attached to this filing.
I certify that this filing complies with the provisions of t Permsylvania: Case Records of the Appellate and Tria documents differently than non-confidential information	he Public Access Policy of the Unified Judicial System of a Courts that require filing confidential information and and documents.
Signature of Attorney or Unrepresented Party	Date
Name:	Attorney Number: (if applicable)
Address:	Telephone:
	Email:

NOTE: Parties and attorney of record in a case will have access to this Confidential Information Form. Confidentiality of this information must be maintained.