



PROTHONOTARY / CLERK OF COURTS
(COURT OF COMMON PLEAS OF MIFFLIN COUNTY)
20 NORTH WAYNE STREET
LEWISTOWN, PA 17044
Phone (717) 248-8146 FAX (717) 248-5275
Hours: 8:00am – 4:00pm
Monday - Friday

**Mifflin County Pro Se
Petition for Modification of a Partial Custody or Visitation Order**

HOW TO FILE A MODIFICATION OF CUSTODY IN MIFFLIN COUNTY

You will need to file in the county where the original custody complaint was filed. Take the original documents to the Prothonotary's office located on the first floor of the courthouse (address listed above). Be sure that **all copies of the Petition** are stamped "FILED" by the Prothonotary and returned to you.

After filing the documents at the Prothonotary's Office you need to serve a copy of the petition on each party or person listed on the petition.

After the Judge's office assigns a hearing date and time, you and the defendant will receive a copy of this order in the mail. You will need to appear for this hearing at the date and time specified.

**DO NOT WRITE ON THE BACK OF FORMS. ADD
ADDITIONAL SHEET OF PAPER.**

DISCLAIMER BY THE COURT OF COMMON PLEAS OF MIFFLIN COUNTY, PA

The Court staff will not be able to give you legal advice or help you fill out/complete the forms. The information in the packets is not a substitute for professional legal advice. The Court assumes no responsibility and accepts no liability for actions taken by users of these documents, including reliance on their contents. If you want to obtain the services of an attorney but do not know whom to contact, you may call Mid Penn Legal Services at (717)248-3099 or (814)238-4958 or Pennsylvania Lawyer Referral listing at (800)692-7375 or log onto palawhelp.org.

Plaintiff

v.

Defendant

:
:
: No. CP-44-CV-_____ - 20__
:
: IN CUSTODY

PETITION FOR MODIFICATION OF A CUSTODY ORDER

1. Petitioner is _____ and resides at

(Street) (City) (State) (Zip Code) (County)

2. Respondent is _____ and resides at

(Street) (City) (State) (Zip Code) (County)

3. Petitioner _____ respectfully represents that on _____ an Order of Court was entered for shared legal custody sole legal custody and partial physical custody primary physical custody shared physical custody sole physical custody supervised physical custody. A true and correct copy of the Order is attached.

4. This Order should be modified because:

5. Petitioner has attached the Criminal Record/Abuse History Verification form required pursuant to Pa. R.C.P. No. 1915.3-2.

WHEREFORE, Petitioner requests that the Court modify the existing Order because it will be in the best interest of the child(ren).

Petitioner's Signature

Respondent's contact information:

Respondent's Name

Respondent's Street Address

Respondent's City, State and Zip Code

Respondent's Cell Phone Number

Respondent's Land Line Number

Respondent's Email Address

Petitioner's Street Address

Petitioner's City, State and Zip Code

Petitioner's Cell Phone Number

Petitioner's Land Line Number

Petitioner's Email Address

VERIFICATION

I verify that the statements made in this petition are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa. C.S. § 4904, relating to unsworn falsification to authorities.

Date

Petitioner's Signature

CERTIFICATE OF COMPLIANCE

I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

Submitted by: _____
Print name of who filed document

Signature: _____

Name: _____
Print

Attorney No. (if applicable): _____

IN THE COURT OF COMMON PLEAS OF Mifflin COUNTY PENNSYLVANIA

Plaintiff

No. CP-44-CV- -20

v.

Defendant

 CUSTODY DIVORCE

**ENTRY OF APPEARANCE OF SELF-REPRESENTED PARTY
PURSUANT TO Pa.R.C.P. No. 1930.8**

I, _____, () Plaintiff or () Defendant, represent myself in the within action.

REMOVAL OR WITHDRAWAL OF COUNSEL OF RECORD (If Applicable)

 Remove _____, Esq., as my attorney of record.

 Withdraw my appearance for the filing party.

_____ Esq. (Print name) ID# _____

_____ Signature DATE: _____

I understand that I am under a continuing obligation to provide current contact information to the court, to other self-represented parties, and to attorneys of record.

All pleadings and legal papers can be served on me at the address listed below, which may or may not be my home address pursuant to Rule 1930.8:

Print Name

Signature

Telephone number

Address

Fax number

City, State, Zip Code

Date

THE PARTY FILING THIS ENTRY OF APPEARANCE MUST PROVIDE NOTICE BY SENDING A COPY TO ALL PARTIES AND ATTORNEYS, INCLUDING THE ATTORNEY REMOVED FROM THE CASE.

IN THE COURT OF COMMON PLEAS OF MIFFLIN COUNTY, PENNSYLVANIA

 Plaintiff
 v.

 Defendant

.....
 No. CP-44-CV-_____ - 20____

 CUSTODY

CRIMINAL RECORD / ABUSE HISTORY VERIFICATION

I, _____, hereby swear or affirm, subject to penalties of law including 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities that:

1. Unless indicated by my checking the box next to a crime below, neither I nor any other member of my household have been convicted or pled guilty or pled no contest or was adjudicated delinquent where the record is publicly available pursuant to the Juvenile Act, 42 Pa.C.S. § 6307 to any of the following crimes in Pennsylvania or a substantially equivalent crime in any other jurisdiction, including pending charges:

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea or no contest plea, or pending charges	Sentence
<input type="checkbox"/>	18 Pa.C.S. Ch. 25 (relating to criminal homicide)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 2702 (relating to aggravated assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 2706 (relating to terroristic threats)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea or no contest plea, or pending charges	Sentence
<input type="checkbox"/>	18 Pa.C.S. § 2709.1 (relating to stalking)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 2901 (relating to kidnapping)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 2902 (relating to unlawful restraint)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 2903 (relating to false imprisonment)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 2910 (relating to luring a child into a motor vehicle or structure)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 3121 (relating to rape)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 3122.1 (relating to statutory sexual assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 3123 (relating to involuntary deviate sexual intercourse)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 3124.1 (relating to sexual assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 3125 (relating to aggravated indecent assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 3126 (relating to indecent assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

<u>Check all that apply</u>	<u>Crime</u>	<u>Self</u>	<u>Other household member</u>	<u>Date of conviction, guilty plea or no contest plea, or pending charges</u>	<u>Sentence</u>
<input type="checkbox"/>	18 Pa.C.S. § 3127 (relating to indecent exposure)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 3129 (relating to sexual intercourse with animal)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 3130 (relating to conduct relating to sex offenders)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 3301 (relating to arson and related offenses)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 4302 (relating to incest)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 4303 (relating to concealing death of child)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 4304 (relating to endangering welfare of children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 4305 (relating to dealing in infant children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 5902(b) (relating to prostitution and related offenses)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 5903(c) or (d) (relating to obscene and other sexual materials and performances)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

<u>Check all that apply</u>	<u>Crime</u>	<u>Self</u>	<u>Other Household Member</u>	<u>Date of conviction, guilty plea or no contest plea, or pending charges</u>	<u>Sentence</u>
<input type="checkbox"/>	18 Pa.C.S. § 6301 (relating to corruption of minors)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 6312 (relating to sexual abuse of children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 6318 (relating to unlawful contact with minor)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. § 6320 (relating to sexual exploitation of children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	23 Pa.C.S. § 6114 (relating to contempt for violation of protection order or agreement)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	Driving under the influence of drugs or alcohol	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	Manufacture, sale, delivery, holding, offering for sale or possession of any controlled substance or other drug or device	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

2. Unless indicated by my checking the box next to an item below, neither I nor any other member of my household have a history of violent or abusive conduct or involvement with a Children & Youth Agency including the following:

<u>Check all that apply</u>		<u>Self</u>	<u>Other Household Member</u>	<u>Date</u>
<input type="checkbox"/>	A finding of abuse by a Children & Youth Agency or similar agency in Pennsylvania or similar statute in another jurisdiction	<input type="checkbox"/>	<input type="checkbox"/>	_____

**Check
all that
apply**

Self

**Other
Household
Member**

Date

- | | | | | |
|--------------------------|--|--------------------------|--------------------------|-------|
| <input type="checkbox"/> | Abusive conduct as defined under the Protection from Abuse Act in Pennsylvania or similar statute in another jurisdiction. | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Involvement with Children & Youth or similar agency in Pennsylvania or another jurisdiction. Where? _____. | <input type="checkbox"/> | <input type="checkbox"/> | _____ |
| <input type="checkbox"/> | Other: _____ | <input type="checkbox"/> | <input type="checkbox"/> | _____ |

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 record/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

Date: _____

Printed Name

IN THE COURT OF COMMON PLEAS OF Mifflin COUNTY, PENNSYLVANIA

Plaintiff
v.

Defendant

No. CP-44-CV-_____ - 20__

.....

CUSTODY

ORDER OF COURT

You, _____ () defendant () respondent, have been sued in court to () OBTAIN () MODIFY () shared legal custody () sole legal custody and () partial physical custody () primary physical custody () shared physical custody () sole physical custody () supervised physical custody of the child(ren):

(Initials ONLY)

You are ordered to appear in person at Mifflin County Courthouse, Lewistown, PA, Courtroom _____ (Address)

on, _____ at _____ M., for (Day and Date) (Time)

- a conciliation or mediation conference.
- a pretrial conference.
- a hearing before the court.

If you fail to appear as provided by this order, an order for custody may be entered against you or the court may issue a warrant for your arrest.

You must file with the court a verification regarding any criminal record or abuse history regarding you and anyone living in your household on or before the initial in-person contact with the court (including, but not limited to, a conference with a conference officer or judge or conciliation) but not later than 30 days after service on the complaint or petition.

No party may make a change in the residence of any child which significantly impairs the ability of the other party to exercise custodial rights without first complying with all of the applicable provisions of 23 Pa.C.S. § 5337 and Pa.R.C.P. No. 191517 regarding relocation.

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. THIS OFFICE CAN PROVIDE YOU WITH INFORMATION ABOUT HIRING A LAWYER. IF YOU CANNOT AFFORD TO HIRE A LAWYER, THIS OFFICE MAY BE ABLE TO PROVIDE YOU WITH INFORMATION ABOUT AGENCIES THAT MAY OFFER LEGAL SERVICES TO ELIGIBLE PERSONS AT A REDUCED FEE OR NO FEE.

Mid Penn Legal Services

(Name)

3500 E. College Ave, Ste 1295

(Street Address)

State College, PA 16801

(City, State, Zip Code)

(800) 326-9177

(Telephone)

AMERICANS WITH DISABILITIES ACT OF 1990

The Court of Common Pleas of Mifflin County is required by law to comply with the Americans with Disabilities Act of 1990. For information about accessible facilities and reasonable accommodations available to disabled individuals having business before the court, please contact our office. All arrangements must be made at least 72 hours prior to any hearing or business before the court. You must attend the scheduled conference or hearing.

BY THE COURT

Date: _____

_____ J.

INSTRUCTIONS FOR SERVICE OF PETITION FOR MODIFICATION OF A PARTIAL CUSTODY OR VISITATION ORDER

After you have filed Petition in the Prothonotary's office, you are required to serve all parties involved with a copy of this Petition.

There are several ways you can handle the serving of the court papers upon the parties. This packet will explain two of them.

- 1) Service by mail. This is probably the best way to serve your Petition. You will need to mail the Petition by first class mail. **The type of mailing you must use is called certified mailing, restricted delivery, with a return receipt requested.** Your post office worker will be able to help you fill in the certified mailing papers correctly.

This type of mailing is used because they must sign for the documents before the postal worker will deliver it. This means that you can prove that they got the Petition because the post office will return a special green card to you that shows the date and time that the letter was given to them. **It is very important you keep this green card because you must file it with the Prothonotary so the judge can see they were served. As soon as you receive the return receipt card back from the post office you will then complete a Certificate of Service and file it with the Prothonotary. Do not forget to staple the return receipt card to the Certificate of Service you fill in and sign.**

- 2) Personal Service. You can have any competent adult who is not a party in the case hand the Petition to the other party. An adult is someone eighteen years of age or older. A person is a competent adult if he or she can accurately remember the time and place that the court papers were handed to the other party and is capable of reporting that information to the judge. **You, because you are a party in the case, may not be the one to hand the papers to the other party.** You should not have another person hand the papers to the other party if there is any danger that the other party may harm them. It is generally best in all cases to have the Sheriff handle the service or do it by mail.

If you find it necessary to have another person hand the papers to the other party, then that person is the one who must sign the Certification of Service. Have the Certification signed as soon as possible after service is made and file it with the Prothonotary.

If the person serving the papers cannot find the other party, he or she may hand the papers to an adult family member of the other party living in the same home as the other party or who is in charge of that home. If the other party lives in a hotel, an apartment house, or a boarding house, the person serving the papers may hand them to the clerk or manager of the residence. The papers may also be handed to the person in charge where the other party works. In any case, the person serving the papers must get the name of the person to whom the papers are handed and put the name in the space provided on the Certificate of Service.

Properly serving the Petition is very important. If this is not handled properly the court may delay the hearing in your case.

