State of Minnesota

County of:

District Court

Judicial District:	
Court File Number:	
Case Type:	Dissolution

In Re the Marriage of:

Name of Petitioner A (First, Middle, Last)

and

Name of Petitioner B (First, Middle, Last)

1. Information about Petitioner A:

Full Name					
	First	Middle		Last	
Address:					
_	Street Address				Apt. No.
	City		County	State	Zip Code
Date of Bir	rth:				
	Month Da	y Year			
Petitioner	A's former or oth	er names:			
(Or write "r	ione")	First		Middle	Last
		First		Middle	Last

Petitioner A's social security number is listed on Confidential Form 11.1 and submitted along with the Joint Petition.

2. Information about Petitioner B:

Full Name:				
	First	Middle	Last	
Address:				
	Street Address		Ap	ot. No.
_				
	City	County	State	Zip Code

Date of Birth:			
Month D	ay Year		
Petitioner B's former or ot	her names:		
(Or write "none")	First	Middle	Last
	First	Middle	Last

Petitioner B's social security number is listed on Confidential Form 11.1 and submitted along with the Joint Petition.

3. Children: "Minor" children are under age 18, or under age 20 but still in high school.

a. Do Petitioners have minor children together? YES	NC
--	----

(If YES, you are using the wrong forms.)

b. Do Petitioners have any adult dependent children who are not able to support themselves because of a physical or mental condition? YES NO (If you answered YES, you may ask the court to make an order regarding support for the adult dependent, but you should use the Marriage Dissolution with Children forms to do this.)

c. Has either Petitioner given birth during the marriage to a child who is not a child of the other spouse? YES NO

If you answered NO to c, skip to d. If YES, continue below:

i. Fill in the information for all children born during the marriage, who are not biological children of both spouses.

Full Name of Child	Date of Birth	Age	Which Petitioner is Birth Parent?

ii. Is there a court order naming someone other than the spouse as the father of the children listed in (i)? \Box YES \Box NO If YES, fill in:

Full Name of Child	Date of Court Order	County/State of Order	Court File No.

iii. Have the spouse and biological Father signed a Minnesota Recognition of Parentage (ROP) for any of the children listed in (i) above? \Box YES \Box NO

If **YES**, state the full name of the child:

and submit with the Petition a certified copy of the Recognition of Parentage.

Has a "Spouse's Non-Parentage Statement" for any of the children listed at (i) above been signed? YES NO

If **YES**, state the name of the child:

and submit with the Petition a certified copy of the "Spouse's Non-Parentage Statement."

Stop: For each minor child listed at c.(i.) you must have a court order OR the Recognition of Parentage **and** Non-Parentage Statement to use the *Joint Petition for Divorce Without Children* forms. Otherwise, use the *Joint Petition for Divorce with Children* forms.

d. Is either spouse pregnant? YES NO UNKNOWN (If either spouse is pregnant, you are using the wrong form. Use *Joint Petition for Divorce with Children*.)

4. Our Marriage

Petitioners were man	ried on: (month, day, year)	in the
City of	, County of	, State
of	, Country of	

5. 180 Day Requirement

Petitioner A has been living in Minnesota for the past six (6) months: YES	🗌 NO
Petitioner B has been living in Minnesota for the past six (6) months: YES	🗌 NO

	Petitioners were married in Minnesota, but neither Petitioner A nor Petitioner B reside in
	Minnesota, nor reside in a jurisdiction that will maintain an action for dissolution because
	of the sex or sexual orientation of the Petitioners. \Box YES \Box NO
6.	Armed Forces
	Petitioner A is an active member of the armed forces: \Box YES \Box NO
	If YES, has the member of the armed forces been stationed in Minnesota for the past six
	(6) months? \Box YES \Box NO
	Petitioner B is an active member of the armed forces: \Box YES \Box NO
	If YES, has the member of the armed forces been stationed in Minnesota for the past six
	(6) months? \Box YES \Box NO
7.	Marriage Cannot be Saved
	There has been an irretrievable breakdown of our marriage relationship.
8.	Physical Living Situation
	Do Petitioner A and Petitioner B live together at this time? \Box YES \Box NO
	If NO , the date of separation was: Month Day Year
	If YES , Petitioner A and Petitioner B are living together at this time because:
	If TES , I entitle A and I entitle D are nying together at this time because.
0	
9.	0
	Has a separate court case for marriage dissolution, legal separation or annulment already
	been started by Petitioner A or Petitioner B in Minnesota or elsewhere: YES NO
	If YES, the type of court case is: and it was
	started in County in the State of
	and the Court file number is, and the status or outcome of

10. Protection or Harassment Order

An Order for Protection or a Harassment/Restraining Order is in effect regarding
Petitioner A and Petitioner B: YES NO
If YES, the Order protects:
County on the date:, and
the Court file number is A copy of the <i>Order</i> is
submitted along with this Joint Petition.
Public Assistance: (Note: If either person is receiving public assistance from the State of Minnesota or
applies for it after this proceeding is started, notice of this marriage dissolution action must be given to the county's collections and support office. See Minn. Stat. § 518A.44)
a. Petitioner A receives public assistance from the State of Minnesota: \Box Yes \Box No
If YES, the assistance is fromCounty. (check all that apply)
☐ MFIP in the amount of \$ per month.
Tribal TANF in the amount of \$ per month.
General Assistance in the amount of \$ per month.
Medical Assistance
Child Care Assistance
☐ MinnesotaCare
b. Petitioner B receives public assistance from the State of Minnesota: 🗌 Yes 🗌 No
If YES, the assistance is fromCounty. (check all that apply)
☐ MFIP in the amount of \$ per month.
Tribal TANF in the amount of \$ per month.
General Assistance in the amount of \$ per month.
Medical Assistance
Child Care Assistance
☐ MinnesotaCare

12. Petitioner A's Employment

a. Petitioner A is employed: \Box Yes \Box No

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- b. Petitioner A is self-employed: 🗌 Yes 🗌 No
- c. Petitioner A works at least 40 hours per week: \Box Yes \Box No

If Petitioner A is unemployed or working less than 40 hours per week, answer these questions:

i. Why is Petitioner A unemployed or working less than 40 hours per week?_____

ii. What is Petitioner A's past work experience (type of jobs, hours, pay, length of time at the job) and what are Petitioner A's professional qualifications or licenses?

d. Current Employment: (if Petitioner A currently has more than two jobs, use an attachment for the additional jobs.)

Name of Petitioner A's Employer (If self-employed, list name and business address)

Employer's Street Address

City

State

Zip Code

Name of Petitioner A's Employer if self-employed, list name and business address)

Employer's Street Address

City	State	Zip Code		
Questions about Current Jobs	1 st Job	2 nd Job		
Is Petitioner A paid by the hour or salaried?	L hourly L salary	hourly salary		
What is the average number of hours Petitioner A works per				
week?	hours	hours		
How much overtime pay does				
Petitioner A receive per week on average?	\$	\$		

Does	Petitioner	А	receive	If Yes, how much was received	If Yes, how much was received
honusoal			in bonuses last year?	in bonuses last year?	
bonuses?			\$	\$	
Yes	\Box No 1 st	t Job)		How much does Petitioner A
□Yes	\Box No 2^n	d Ial		expect to receive this year?	expect to receive this year?
	\square NO 2^{n}	- 101	5	\$	\$

13. Petitioner A's Income

Source of Income Amount Per Month (or zero) before deductions/taxes					
Self Employment Income		\$	per month		
Self Employment income means gros business expenses.	ss receipts minus costs of goods	sold, minus	ordinary and necessary		
Job with		\$	per month		
Monthly income from a job = Hourl	y wage x Hours worked per we	eek x 4.33 (w	eeks per month)		
Second Job with		\$	per month		
Third Job with		\$	per month		
Commissions from all jobs		\$	per month		
Divide the total amount you expect	this year by 12 to get a month	ly average			
Unemployment benefits		\$	per month		
Social Security Retirement, Sur	vivors or Disability				
Income (RSDI) (do not i	include SSI)	\$	per month		
Investment and Rental Income		\$	per month		
Annuity payments		\$	per month		
Pension or Disability from work	c or military	\$	per month		
Worker's Compensation			per month		
Court-ordered spousal maintena	nce received	\$	per month		
Other incomeList Source		\$	per month		
Add all of the above. Total n	nonthly income	\$	per month		
Enter the amount of child supp to pay for any non-joint chi			per month		
Enter the amount of spousal ma court-ordered to pay to a cu		per month			

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14. Petitioner B's Employment

- a. Is Petitioner B is employed? YES NO
- b. Is Petitioner B is self-employed? YES NO
- c. Is Petitioner B working at least 40 hours per week? YES NO If Petitioner B is unemployed or works less than 40 hours per week, answer these questions:

i. Explain why Petitioner B is not working or why Petitioner B works less than 40 hours per week

ii. What is Petitioner B's past work experience (type of jobs, hours, pay, length of time at the job) and professional qualifications or licenses?

d. Current Employment: (If Petitioner B has more than two jobs at this time, use an attachment for the additional jobs.)

Name of Petitioner B's Employer (If Self-Employed list name and business address)

Employer's Street Address

City

Name of Petitioner B's Employer (If Self-Employed list name and business address)

Employer's Street Address

City

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Questions about Jobs1st Job2nd JobIs Petitioner B paid by the hour or
salaried?Is hourly is salaryhourly is salary

State

Zip Code

State

Zip Code

What is the average number of hours Petitioner B works per week?	hours	hours
How much overtime pay does Petitioner B receive per week on average?	\$	\$
Does Petitioner B receive bonuses? Yes No 1 st Job Yes No 2 nd Job	If Yes, how much did Petitioner B receive in bonuses last year? \$	If Yes, how much did Petitioner B receive in bonuses last year? \$ How much does Petitioner B expect to receive this year? \$

15. Petitioner B's Income

Source of Income Amount Per Month (or zero) before deductions/taxe					
Self Employment Income		\$	per month		
Self Employment income means	gross receipts minus costs	of goods sold minus	ordinary and necessary		
business expenses.					
Job with		\$	per month		
Monthly income from a job = H	lourly wage x Hours worke	d per week x 4.33 (w	eeks per month)		
Second Job with		\$	per month		
Third Job with		\$	per month		
Commissions from all jobs		\$	per month		
Divide the total amount you ex	pect this year by 12 to get	a monthly average			
Unemployment benefits		\$	per month		
Social Security Retirement, S	urvivors or Disability				
Income (RSDI) (do no	t include SSI)	\$	per month		
Investment and Rental Incom	ne	\$	per month		
Annuity payments		\$	per month		
Pension or Disability from we	ork or military	\$	per month		
Worker's Compensation		\$	per month		
Court-ordered spousal mainte	nance received	\$	per month		
Other incomeIdentify Sou	urce	\$	per month		
Add all of the above. Total	monthly income	\$	per month		

Enter the amount of spousal maintenance Petitioner B is court-ordered to pay to a current or former spouse \$_____ per month

- Health Care Coverage (Health Care Coverage does not include MinnesotaCare or Medical Assistance.)
 - a. Petitioner A has \Box medical \Box dental insurance or \Box no insurance.
 - b. Petitioner B has \Box medical \Box dental insurance or \Box no insurance.

17. Spousal Maintenance

Spousal Maintenance is money paid by one spouse to the other for living expenses.

Check only one box:

Petitioner A and Petitioner B do not need spousal maintenance at this time, or in the future. Both parties agree that each party is fully capable of self-support and is not dependent upon the other for additional support in the form of spousal maintenance. Each party has made a full and fair disclosure of all income and assets and liabilities that each is responsible for, and agrees that this waiver is reasonable. The waiver is fair and equitable and is supported by the above consideration and was signed by both parties after full financial disclosure to each other.

Petitioner A or Petitioner B may need spousal maintenance in the future. The court should reserve maintenance to allow either party to ask for spousal maintenance in the future because: (explain why you want to do this)

Petitioner A needs spousal maintenance from Petitioner B now. Petitioner A is
 ______years of age, Petitioner A and Petitioner B have been married for ______
 years. Petitioner A has the following education: ______

Petitioner A's gross monthly income totals ______. Petitioner A's monthly expenses total \$______ and Petitioner A is not able to maintain the standard of living established during the marriage because:______

Petitioner B has the ability to pay Petitioner A \$_____per month for spousal maintenance.

Petitioner B needs spousal maintenance from Petitioner A now. Petitioner B is _____years of age, Petitioner A and Petitioner B have been married for _____years. Petitioner B has the following education: ______.
 Petitioner B's gross monthly income totals \$______. Petitioner B's monthly expenses total \$______, and Petitioner B is not able to maintain the standard of living established during the marriage because: _______

Petitioner A has the ability to pay Petitioner B \$_____per month for spousal maintenance.

18. Name Change

- a. Neither person wants to change his/her name.
- b. Petitioner A wants to change his/her name to: (*full name, not initials*)

first middle last

- This name change request is made with no intent to defraud or mislead anyone:
 True False
- 2. The person requesting the name change has been convicted of a felony.

🗌 NO

If YES:

i. Notice of this request for name change has been given to the proper authority

as required by Minn.Stat. § 259.13. (IMPORTANT NOTICE: If you are a convicted felon and you request a name change without following the requirements of Minn. Stat §259.13, using the new last name after your divorce is a gross misdemeanor.)

☐ ii. An *Affidavit of Service of the Notice* marked Exhibit "A" has been submitted with this to this Joint Petition.

C. Petitioner B wants to change his/her name to: (*full name, not initials*)

first	middle				last			
1 11		1 .1	• , ,	. 1.0	1	• 1		

This name change request is made with no intent to defraud or mislead anyone:
 True
 False

2. The person requesting the name change has been convicted of a felony.YES NO

If YES:

i. Notice of this request for name change has been given to the proper authority as required by Minn.Stat. § 259.13. (IMPORTANT NOTICE: If you are a convicted felon and you request a name change without following the requirements of Minn. Stat §259.13, using the new last name after your divorce is a gross misdemeanor.)

☐ ii. An *Affidavit of Service of the Notice* marked Exhibit "A" has been submitted with this to this Joint Petition.