

FLORIDA COURT FORMS

Divorce Application

County you live in: _____

Your Name: _____ Your Date of Birth _____

Address: _____

City State and Zip: _____

Phone Number: _____ E-mail address: _____

Spouse's Name: _____ Date of Birth _____

Address: _____

City State and Zip: _____

Phone Number: _____ E-mail address: _____

Your Social Security Number: _____

Spouse's Social Security Number: _____

Date of Marriage _____ City & State of Marriage _____

Approximate Date of Separation: _____

Children:

1. Name _____

Sex _____ Date of Birth _____ City/State of Birth _____

Lives with _____ Social Security Number _____

2. Name _____

Sex _____ Date of Birth _____ City/State of Birth _____

Lives with _____ Social Security Number _____

3. Name _____

Sex _____ Date of Birth _____ City/State of Birth _____

Lives with _____ Social Security Number _____

Have you lived in the State of Florida for at least six (6) months? _____

Is your gross income over \$50,000.00 ____ Yes ____ No

Is your spouse's income over \$50,000.00 ____ Yes ____ No

If you would like your former name restored, write it below _____

ARE YOU PREGNANT ____ Yes ____ No If Yes who is the Father _____

ARE YOU IN THE MILITARY ____ Yes ____ No

IS YOUR SPOUSE IN THE MILITARY ____ Yes ____ No

HAVE YOU RENEWED YOUR DRIVERS LICENSE IN LAST 6 MONTHS

_____ Yes _____ No

PLEASE CHECK THE DIVORCE PACKAGE THAT YOU NEED:

- _____ Parties agree with children and assets
- _____ Parties disagree with children and assets
- _____ Spouse unknown with children and assets

- _____ Parties agree with children and no assets
- _____ Parties disagree with children and no assets
- _____ Spouse unknown with children and no assets

- _____ Parties agree with no children and have assets
- _____ Parties disagree with no children and have assets
- _____ Spouse unknown with no children and have assets

- _____ Parties agree with no children and no assets
- _____ Parties disagree with no children and no assets
- _____ Spouse unknown with no children and no assets

Are you requesting Guidelines Child Support or have you and your spouse agreed on an amount? If agreed on amount what is the amount _____.

We need dates and addresses for where your children have lived for the past 5 years and what parent(s) they lived with at the time: _____

PLEASE BRING A CHECK STUB WHEN YOU RETURN TO PICK UP YOUR PAPERWORK THIS IS SO WE CAN COMPLETE YOUR FINANCIAL AFFIDAVIT.

FLORIDA COURT FORMS and no one associated with FLORIDA COURT FORMS has represented himself/herself as an attorney and I have not asked for nor received any legal advice. I am paying for form preparation only. FLORIDA COURT FORMS's liability to me is limited to the replacement of forms that were not prepared according to my wishes. I acknowledge and understand that no guarantees have been made to me by FLORIDA COURT FORMS or anyone associated with FLORIDA COURT FORMS concerning the result or outcome of my divorce. I understand the information on the sheet labeled "DIVORCE INFORMATION".

Date: _____

Signature _____