IN THE SUPERIOR COURT OF COUNTY STATE OF GEORGIA _____, Petitioner, Civil Action Case Number: v. , Respondent. PETITION FOR LEGITIMATION AND CUSTODY/VISITATION My name is _____ and I am representing myself in this Petition for Legitimation and Custody/Visitation. In support of my case, I state as follows: 1. The Respondent is . [Check only one of the following, either (a), (b), or (c).] \square (a) the mother of my child(ren) \square (b) the legal guardian of my child(ren) \square (c) the legal custodian of my child(ren). 2. **Jurisdiction and Venue**: [Check those that apply] \square (a) The Respondent is a resident of _____ County, Georgia. \square (b) The Respondent is a resident of _____ County, Georgia, and I live in _____ County. The Respondent has acknowledged service of process and consented to the jurisdiction and venue of this Court. \square (c) The Respondent resides in the State of ______, but I am a resident of _____ County and my child(ren) reside(s) in Georgia.

\square (d) The Respondent resides in the State of					
ut my child(ren) reside(s) in County.					
☐ (e) The Respondent's whereabouts are unknown to me, but I am a reside					
lotion for Service by Publication and Affidavit of Diligent Search with this					
etition, and incorporate them here by reference.					
\square (f) The Respondent's whereabouts are unknown to me, but my child(ren)					
reside(s) in County. I am filing my Motion for Service					
ublication and Affidavit of Diligent Search with this Petition, and incorporate					
nem here by reference.					
\square (g) The Respondent Mother is deceased, but my child(ren) or I reside(s) is					
County.					
3.					
ervice of Process: The Respondent shall be served as provided under OCGA §					
1-4, in the following manner: [Check those that apply]					
$\hfill\square$ (a) The Respondent may be served by the Sheriff's Department at the					
espondent's residence/work address, which is:					
\square (b) The Respondent has acknowledged service of process. I am filing the					
cknowledgment of Service (which has been signed by the Respondent) with this					
etition.					
\square (c) The Respondent's whereabouts are unknown to me. I am filing my					
lotion for Service by Publication and Affidavit of Diligent Search with this					
etition. The Respondent shall be served by publication as provided under OCGA					
·11-4(e)(1) for those who cannot be found within the State of Georgia. To the bes					
my knowledge, the Respondent's last known address is:					

	\square (d) The Respondent Mot	her is decea	used.		
	· Child(ren) : I am the fathe		child(ren), lis	ted below: [Incude \	Year
	Name of Child	Male/l	Female	Year of Birth	<u> </u>
Child(inor child(ren) was/were bor (ren)'s Current Residenc	5. e : The mind	or child(ren) (
County	y, with the following adult:			<u></u> . <u></u> .	The
child(r	en) has/have lived at this ac		e approximate	ely	
Child	(ren)'s Past Residences: I	6.	nast fivo voar	rs the child(ron) has	s/havo
	t the following addresses:	Juling the	past live year	s, the chira(ren) has	<i>,,</i> 114 v C
	<u>Dates at Address</u>		$\underline{\text{Address}}$		

the child(ren) has/have lived with the following adults: Name of Person Person's Address 8. Other Court Cases About Child(ren): [Check only one of the following, either (a) or (b).] \square (a) I have never participated as a party or a witness or in any other capacity in any other litigation concerning the custody of or visitation with the minor child(ren) in this or any other state. \square (b) I have participated in other litigation concerning the custody of the minor child(ren) in Georgia or another state. The court, case number and date of any order concerning custody or visitation under the other litigation are as follows: 9. Other Proceedings That Could Affect Custody or Visitation in This Case: [Check only one of the following, either (a) or (b).] \square (a) I do not have any information of any proceeding that could affect this case, including proceedings for enforcement and proceedings relating to family violence, protective orders, termination of parental rights, and adoptions in this or any other state. \square (b) I have information about a proceeding that could affect this case, including proceedings for enforcement and proceedings relating to family violence, protective orders, termination of parental rights, or adoptions in this or another state. The court, the case number and the nature of the proceeding are as follows:

Adults with Whom Child(ren) Has/Have Lived: During the past five years,

Others Claiming Custody or Visitation Rights: [Check only one of these, either						
(a) or	(b).]					
	\square (a) I do not know of any person who is not a party to this case, who has					
physic	physical custody of the child(ren) or who claims to have custody or visitation rights					
with r	respect to the child(ren).					
□ (b)	\Box (b) I know of someone who is not a party to this case, who has physical custody of the child(ren) or who claims to have custody or visitation rights with respect to the					
the ch						
child(ren). The names and present addresses of the person(s) are:					
	11.					
I wan	t to legitimate my relationship with the child(ren).					
	12.					
I wan	t to change the name of the child(ren) [complete only in applicable]					
from:	to:					
from:	to:					
from:	to:					
	13.					
	I seek to have my name entered as the father on the birth record of each					
child.						
	14.					
	Child Custody and Visitation:					
(a) I should be awarded the following: [Check all that apply]						
	\square Sole legal custody [OR]					
	☐ Joint legal custody					
	□ Sole physical custody [OR]					
	☐ Joint physical custody					

☐ Reasonable visitation as follows:
(b) I believe that the custody and visitation arrangement set forth in the
attached Permanent Parenting Plan is in the best interests of the child(ren).
15.
Child Support: [Check only one of these, either (a), (b), (c) or (d).]
\square (a) The Respondent has income or is capable of earning sufficient money to
support the minor child(ren).
\square (b) I have income or I am capable of earning sufficient money to support
the minor child(ren).
\square (c) I am not asking the Court to address this issue in this case.
\square (d) The issue of child support cannot be decided in this action because the
Petition for Legitimation and Custody/Visitation does not have personal jurisdiction
over the Respondent.
16.
Health Insurance for Child(ren): [Check only one of these, either (a), (b), (c) or
(d).]
\square (a) The Respondent should be ordered to maintain a policy for medical,
dental and hospitalization insurance for the minor child(ren).
\square (b) I already provide health insurance for the child(ren).
\square (c) I am not asking the Court to address this issue in this case.
\square (d) The issue of health insurance cannot be decided in this action because
the Court does not have personal jurisdiction over the Respondent.
FOR THESE REASONS, I REQUEST THE FOLLOWING RELIEF: [Check
all that apply.]
\square (a) That the Court enter an Order legitimating my relationship with the
child(ren) so that the child(ren) and I will be capable of inheriting from each other
in the same manner as if the child(ren) had been born in wedlock;

□ (b) 1	hat the name of the child(ren) be changed
from:	to:
from:	to:
from:	to:
□ (c) T	hat the Department of Vital Statistics be ordered and directed to
amend the bir	rth records of each child and reissue a birth certificate showing me as
the father and	d changing each child's name as requested above;
□ (d) T	hat the custody and visitation for the child(ren) be ordered according
to Paragraph	14;
□ (e) ′	That child support and health insurance, medical expenses and life
insurance for	the support of the child(ren) be ordered according to Paragraphs 15
and 16;	
□ (f) 1	That Respondent be served with notice of this Petition as provided by
law;	
□ (g) T	hat a Rule Nisi be scheduled by the Court, to decide on the relief I
have requeste	ed;
□ (h) ¹	That the Court order any and all other relief that the Court finds
appropriate.	
This day o	of, 20
Petitioner, Pr	o se (Signature)
Print Name:	
Address:	
Email Addres	s:
Telephone No	v.: