

**DISTRICT COURT OF THE KAW NATION**  
**Drawer 50**  
**698 Grandview Drive**  
**Kaw City, OK 74641**  
**(580) 269-2552**

This form packet is supplied by the Kaw Nation Court Clerk's Office. Nothing in these forms is to be construed as providing legal advice. It is highly recommended that you review these documents with an attorney. The Kaw Nation Court Clerk, Kaw Nation District Court, nor the Kaw Nation shall be liable for any use of the following forms.

Parties seeking an Order of the Court are responsible for completing all required documents. The Court Clerk cannot fill out the form for you nor can they give out legal advice. The Kaw Nation does not provide lawyers, legal advice, or legal assistance. If you need legal advice or representation, you must retain an attorney at your expense. Your selected Attorney **must** be registered to practice law with the Kaw Nation Bar Association prior to representing you in the Kaw Nation District Court. You may contact the Court Clerk for a current list of KNBA attorneys.

All fees, including service fees, must be paid **at the time of** filing. Fees cannot be waived unless a Paupers Affidavit has been filed and approved by the Judge prior to filing. This form may be requested from the Court Clerk.

**INSTRUCTIONS FOR FILING**

1. A filing fee of **\$75.00** is required when filing a Petition for Divorce. Most other filings are **\$50.00**. There is no cost to file a Protective Order. Please be prepared to inform the Court Clerk as to which type of Process Service you will be utilizing at the time of filing your packet.
2. All parties must be notified of the filing of a Petition and any pending hearings. Respondents are allowed twenty (20) days from service of a Petition to file an answer with the Court. It will be at least a month from your file date before a court date will be set unless the Respondent signs a Waiver. A Notice of Hearing and/or Summons may be served by Tribal Police within Kay and Osage County for a Service Fee of **\$50.00**. If the parties reside outside of the Kay and Osage County areas, a private process server may need to be hired for service at a starting rate of **\$99.00**. You will be billed for the remaining due amount.
3. The Notice may also be served through Certified Mail. A Service Fee of **\$17.00** will be assessed for the Court Clerk to mail the Notice.

4. It is required by law that Notice be given to the Respondent, so it is necessary to have a current mailing and physical address for this person. If you do not have an address, additional charges will need to be paid to obtain Notice by Publication in the local newspaper. THIS FEE CANNOT BE WAIVED AND WILL NEED TO BE PAID WHEN FILING FORMS. A fee of **\$75.00** (average publication cost) will be assessed. Keep in mind that the fee assessed for publication is an average cost and it could cost more. If the cost is more than \$75.00, you will be responsible for the balance due at the end of publication.
5. To begin the filing process, the following required documents must be submitted to the Court Clerk:
  - Copy of your Driver's License (or State ID)
  - Copy of your Marriage Certificate
  - Copies of Birth Certificates
  - Copies of Death Certificates (if applicable)
  - Copies of CDIB Cards
  - Contact Information Sheet
  - Petition
  - Financial Affidavit (Divorce)
  - Statement of Facts (Guardianship)
  - OK Sex Offenders Registration Affidavit (Adoption, Custody and Guardianship)
  - Request for Hearing
  - Summons
  - Filing and Service fees: **Cash or Money Order** Payable to the **Kaw Nation District Court**
6. Please ensure that all required documentation has been attached and provided at the time of filing your Petition. Make sure that you completely fill out the documents and attach the required documentation. Documents that are not completely filled out can delay the process of your case. Parties are responsible for completing their own petition forms. The court clerk cannot give legal advice or assist you in filling out the forms.
7. Once your Petition and all required documentation has been received, an Order for Hearing will be issued by the Court Clerk informing all parties of the date and time of the scheduled hearing.
8. In an adoption, you **MUST** have an attorney. Also, once the Petition is filed, an in-home study must be completed before the adoption can be finalized (unless it is a step-parent adoption).

# CONTACT INFORMATION

---

**Petitioner's Full Name:** \_\_\_\_\_

Previous Names: \_\_\_\_\_

If Married, To Whom: \_\_\_\_\_ Date: \_\_\_\_\_ City/County/State: \_\_\_\_\_

Mailing Address (Including County): \_\_\_\_\_

Physical Address (Including County): \_\_\_\_\_

Work Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

Born in City/County/State: \_\_\_\_\_ Birth Certificate #: \_\_\_\_\_

DL No: \_\_\_\_\_ DL State: \_\_\_\_\_

Attorney: \_\_\_\_\_

---

**Respondent's Full Name:** \_\_\_\_\_

Previous Names: \_\_\_\_\_

If Married, To Whom: \_\_\_\_\_ Date: \_\_\_\_\_ City/County/State: \_\_\_\_\_

Mailing Address (Including County): \_\_\_\_\_

Physical Address (Including County): \_\_\_\_\_

Work Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

Born in City/County/State: \_\_\_\_\_ Birth Certificate #: \_\_\_\_\_

DL No: \_\_\_\_\_ DL State: \_\_\_\_\_

Attorney: \_\_\_\_\_

---

**Other Interested Party:** \_\_\_\_\_

Previous Names: \_\_\_\_\_

If Married, To Whom: \_\_\_\_\_ Date: \_\_\_\_\_ City/County/State: \_\_\_\_\_

Mailing Address (Including County): \_\_\_\_\_

Physical Address (Including County): \_\_\_\_\_

Work Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

DOB: \_\_\_\_\_ SSN: \_\_\_\_\_

Born in City/County/State: \_\_\_\_\_ Birth Certificate #: \_\_\_\_\_

DL No: \_\_\_\_\_ DL State: \_\_\_\_\_

Attorney: \_\_\_\_\_

---

**CHECKLIST FOR DIVORCE**

(Please complete and print clearly)

(TOP LINE TO BE COMPLETED BY THE CLERK)

DATE FILED \_\_\_\_\_ FEE PAID \$ \_\_\_\_\_ YES \_\_\_\_\_ NO \_\_\_\_\_

**PETITIONER** \_\_\_\_\_

RESIDENT OF: COUNTY \_\_\_\_\_ CITY \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

TELEPHONE NUMBER \_\_\_\_\_

TRIBE OF PETITIONER \_\_\_\_\_

ENROLLMENT NUMBER \_\_\_\_\_

LEGALLY MARRIED OR COMMON-LAW \_\_\_\_\_

DATE MARRIED OR APPROXIMATE DATE BEGAN LIVING TOGETHER \_\_\_\_\_

MARRIED IN WHAT COUNTY, CITY, AND STATE \_\_\_\_\_

DATE SEPARATED \_\_\_\_\_

FULL NAME, DATE OF BIRTH OF ALL MINOR CHILDREN OF THE PARTIES:

\_\_\_\_\_ DOB \_\_\_\_\_

\_\_\_\_\_ DOB \_\_\_\_\_

\_\_\_\_\_ DOB \_\_\_\_\_

\_\_\_\_\_ DOB \_\_\_\_\_

\_\_\_\_\_ DOB \_\_\_\_\_

CHILDREN RESIDE AT WHAT ADDRESS \_\_\_\_\_

ARE YOU REQUESTING CUSTODY OF CHILD(REN) \_\_\_\_\_ YES \_\_\_\_\_ NO

IF YES, DO YOU WANT **ALL** THE CHILDREN? \_\_\_\_\_ YES \_\_\_\_\_ NO

HOW MUCH CHILD SUPPORT ARE YOU REQUESTING? \$ \_\_\_\_\_ PER CHILD  
FOR A TOTAL OF \$ \_\_\_\_\_ PER MONTH.

IS THERE A COURT CASE CONCERNING ANY OF THESE CHILDREN? \_\_\_\_ YES \_\_\_\_ NO

IF YES, WHERE \_\_\_\_\_

WHAT KIND OF CASE? \_\_\_\_\_

IS STANDARD VISITATION (EVERY OTHER WEEKEND) ACCEPTABLE? \_\_\_\_ YES \_\_\_\_ NO

IF NOT, STATE WHY \_\_\_\_\_

IF YOU NEED A PROTECTIVE ORDER STATE WHY \_\_\_\_\_

**RESPONDENTS NAME** \_\_\_\_\_

RESIDENT OF COUNTY \_\_\_\_\_ CITY \_\_\_\_\_

STATE \_\_\_\_\_ MAILING ADDRESS \_\_\_\_\_

TRIBE OF SPOUSE \_\_\_\_\_

ENROLLMENT NUMBER \_\_\_\_\_

DO YOU OWN ANY PROPERTY? (House, Furniture, Cars, etc.) \_\_\_\_ YES \_\_\_\_ NO

IF YES, PLEASE LIST \_\_\_\_\_

WHAT PROPERTY ARE YOU REQUESTING? \_\_\_\_\_

WHAT PROPERTY IS TO BE AWARDED TO THE RESPONDENT? \_\_\_\_\_

PLEASE LIST ALL DEBTS, THE AMOUNT OF EACH, AND HOW YOU WISH TO HAVE THEM DIVIDED. \_\_\_\_\_

\_\_\_\_\_  
ARE YOU REQUESTING A NAME CHANGE? IF SO, TO WHAT \_\_\_\_\_





2. That the Petitioner is requesting a Dissolution of Marriage due to  irreconcilable differences  adultery  extreme cruelty  abandonment and/or  habitual intemperance; and
3. That the Petitioner is \_\_\_\_\_ years of age,  is  is not employed and resides at \_\_\_\_\_ and has resided there for \_\_\_\_\_  months  years; and
4. That the Respondent is \_\_\_\_\_ years of age,  is  is not employed and resides at \_\_\_\_\_ and has resided there for \_\_\_\_\_  months  years; and
5. That the parties were married on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ in the State of \_\_\_\_\_; and
6. That the parties have been separated since the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_; and
7. There were \_\_\_\_\_ child(ren) born of the marriage:
  - a. \_\_\_\_\_(name), a  male  female child born on \_\_\_\_\_ (mm/dd/yyyy), and  is  is not eligible for enrollment with a federally recognized Tribe; and
  - b. \_\_\_\_\_(name), a  male  female child born on \_\_\_\_\_ (mm/dd/yyyy), and  is  is not eligible for enrollment with a federally recognized Tribe; and
  - c. \_\_\_\_\_(name), a  male  female child born on \_\_\_\_\_ (mm/dd/yyyy), and  is  is not eligible for enrollment with a federally recognized Tribe; and

- d. \_\_\_\_\_(name), a  male  female child born on \_\_\_\_\_ (mm/dd/yyyy), and  is  is not eligible for enrollment with a federally recognized Tribe; and
- e. \_\_\_\_\_(name), a  male  female child born on \_\_\_\_\_ (mm/dd/yyyy), and  is  is not eligible for enrollment with a federally recognized Tribe; and
8. At the time of filing this Petition there are no other children expected of this marriage:  no  yes, expected due date: \_\_\_\_\_; and
9. That at the time of filing this Petition the child(ren) currently reside with the  Petitioner  Respondent  Other: \_\_\_\_\_ at \_\_\_\_\_; and
10. That at the time of filing this Petition there  is  is not an ongoing case that includes the child(ren) listed in the Petition; Type of case:  custody  guardianship  protection order; Date issued: \_\_\_\_\_; Case no: \_\_\_\_\_; and
11. That the Petitioner is a fit and proper person to have  joint custody  sole custody and control of the said minor child(ren) of the parties; and
12. That the Respondent  is  is not a fit and proper person to have joint care, custody and control of the said minor child(ren) of the parties and that the Court order  joint custody and visitation  sole custody and determine if visitation is appropriate; and
13. That the Respondent should not share joint custody and visitation because of the following:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_;

14. That the Respondent has the ability to seek and gain meaningful employment and  is employed  is not employed and that they should be ordered and directed to make temporary payments of child support for the maintenance and support of the child(ren) named in this Petition; and

15. That the Petitioner and/or Respondent be ordered to submit an application and cooperate with the Kaw Nation Child Support Division to determine appropriate child support; and

16. That this portion of the Petitioner's Petition shall be construed as their application for orders for  joint custody and visitation  sole custody and determine if visitation is appropriate and temporary child support of the minor child(ren) of the parties; and

17. That the Petitioner  is  is not requesting spousal support to be paid in an amount and duration deemed appropriate; and

18. That the Petitioner requests use of the  marital home and/or  family vehicle during the pendency of this action; and

19. That the following debts have incurred during the course of this marriage and should be divided as follows:

Creditor:	Amount:	Awarded to:
-----------	---------	-------------

\_\_\_\_\_ \$ \_\_\_\_\_  Petitioner  Respondent  
 \_\_\_\_\_ \$ \_\_\_\_\_  Petitioner  Respondent  
 \_\_\_\_\_ \$ \_\_\_\_\_  Petitioner  Respondent  
 \_\_\_\_\_ \$ \_\_\_\_\_  Petitioner  Respondent  
 \_\_\_\_\_ \$ \_\_\_\_\_  Petitioner  Respondent

(Attach a separate sheet of paper if more room is needed)

20. That the following property has been acquired during the course of this marriage and should be divided as follows:

Name/Type of Property:	Awarded to:
_____	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
_____	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
_____	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
_____	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent
_____	<input type="checkbox"/> Petitioner <input type="checkbox"/> Respondent

(Attach a separate sheet of paper if more room is needed)

21. The Petitioner wishes to  resume married name  restore last name to: \_\_\_\_\_; and

22. The Kaw Nation has jurisdiction and is the proper place of venue for this matter pursuant to the Constitution of the Kaw Nation; and

WHEREFORE, the Petitioner prays for a final decree of divorce on the grounds of incompatibility; a fair and equitable division of the property and debts of the marriage between the parties; order custody of the minor child(ren) and permanent child support; and for such other relief as the Kaw Nation District Court deems equitable and just.

\_\_\_\_\_  
Petitioner's Printed Name

VERIFICATION

STATE OF OKLAHOMA    )  
COUNTY OF \_\_\_\_\_ )

I, \_\_\_\_\_, do solemnly swear that I am the Plaintiff and that the contents and facts herein are true and correct.

\_\_\_\_\_  
Plaintiff's Signature

SUBSCRIBED AND SWORN to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

(Seal)

\_\_\_\_\_  
Notary Public

Commission expires on: \_\_\_\_\_  
Commission No.: \_\_\_\_\_





Hourly rate of Pay \$ \_\_\_\_\_  
 Pay Period \_\_\_\_\_  
 (Weekly, Bi-Weekly,  
 Monthly)

If salaried \$ \_\_\_\_\_  
 Pay above is for \_\_\_\_\_  
 (Weekly, Bi-Weekly,  
 Monthly, Yearly)

Average Hours per  
 week \_\_\_\_\_

If paid weekly x 4.3, biweekly x 2.15

**Gross Monthly Income \$** \_\_\_\_\_

**OTHER SOURCES OF INCOME**

	(Monthly)	% Tax Paid
Public Assistance	\$ _____	_____
Rental Income	\$ _____	_____
Maintenance/Alimony	\$ _____	_____
Bonus/Commissions	\$ _____	_____
Voluntarily Deferred Income	\$ _____	_____
Pensions & Retirement	\$ _____	_____
Social Security	\$ _____	_____
Worker's Unemployment Compensation	\$ _____	_____
Dividends/Interest/Capital Gains	\$ _____	_____
Military/Veterans	\$ _____	_____
Business/Farm/Jobs for Cash	\$ _____	_____
Any other Source	\$ _____	_____
	_____	_____
<b>Total Gross Income:</b>	\$ _____	_____

**OTHER ASSETS**

Bank Accounts:

Name & Address of Institution	Type of account	Average bal. over 6 months
Name & Address of Institution	Type of account	Average bal. over 6 months



Real Estate:

	\$	
Address/Location	Mortgage Balance	Type of Interest

Insurance:

		\$	\$
Type of Ins. and Issuing Company	Beneficiary	Face Value	Cash Value

Vehicles (All types of motorized):

	\$	\$			
Type/Make/Year	Loan Bal	Value	No. Shares	Value	Issuer
	\$	\$		\$	
Type/Make/Year	Loan Bal	Value	No. Shares	Value	Issuer

Stocks & Securities:

	\$				
Type/Make/Year	Loan Bal	Value	No. Shares	Value	Issuer
	\$	\$		\$	
Type/Make/Year	Loan Bal	Value	No. Shares	Value	Issuer

Other Assets:

List any other item that has a value of \$250.00 or more including collectibles, equipment, machinery, furniture, electronics, precious metals or stones, tools and implements.

Type of Asset	Outstanding Loan	Net Value
	\$	\$
	\$	\$
	\$	\$
	\$	\$

**FUTURE INCOME**

When do you expect to receive the next pay raise from your employer? \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

What is the amount of your last two (2) pay raises? \$ \_\_\_\_\_ \$ \_\_\_\_\_

Do you expect to receive monies, from any source, in the next year?

YES NO

\_\_\_\_ / \_\_\_\_

If "YES" from what source and when?

\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
\_\_\_\_ / \_\_\_\_ / \_\_\_\_

- If you are not married, but share a household with any other adult, indicate only your share of those expenses. (Example: If rent for the household is \$400.00, and you pay \$200.00, enter \$200.00)
- If your rent, utilities, food or any other expenses are included with your rent payment, do not enter that amount separately, but indicate that they are included with your rent.
- If you need additional space, complete your answer on the backside of the question page.

**I declare under penalty of perjury that the foregoing and any attachments hereto are true and correct. Dated this \_\_\_\_\_ day of \_\_\_\_\_, 202\_\_\_\_\_.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

**VERIFICATION**

STATE OF OKLAHOMA    )  
COUNTY OF \_\_\_\_\_ )

I, \_\_\_\_\_, do solemnly swear that the contents and facts herein are true and correct.

\_\_\_\_\_  
Applicant

SUBSCRIBED AND SWORN to before me on this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

Commission expires on: \_\_\_\_\_

Commission No.: \_\_\_\_\_





---

**AFFIDAVIT OF SERVICE**

**SERVICE BY PROCESS SERVER**

I, \_\_\_\_\_, hereby certify that I served this Summons together with a copy of the Petition upon \_\_\_\_\_ at \_\_\_\_\_ am/pm and made the return according to law, and that I am duly authorized to endorse this affidavit, so help me God.

\_\_\_\_\_  
Police Officer/Process Server

Subscribed to and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 2024.

My commission expires: \_\_\_\_\_.

My commission number: \_\_\_\_\_.

**CERTIFICATION OF SERVICE BY MAIL**

I hereby certify that I mailed copies of the foregoing summons with a copy of the petition and order attached, to the following named parties at the address shown by certified mail, addressee only, return receipt requested, on the \_\_\_\_\_ day of \_\_\_\_\_, 2024, and said receipt is attached hereto.

Parties	Address Where Served	Date Received
---------	----------------------	---------------

_____	_____	_____
-------	-------	-------

\_\_\_\_\_  
Court Clerk