

COURT CODE: _____

DISTRICT COURT
 JUSTICE COURT IN THE TOWNSHIP OF _____
_____ COUNTY, NEVADA

Applicant (*print your name above*),
vs.

CASE NO.: _____

DEPT: _____

Adverse Party (*print the name of the person you
want protection from above*).

UCCJEA DECLARATION

This document will be sealed and kept confidential if requested in section 9

1. Children.

Child 1: _____
First Middle Last DOB

Address City, State, Zip Code

When did the child start living here? (*date*) _____

Who does the child live with? Me Someone else (*name*) _____

Child 2: _____
First Middle Last DOB

Address City, State, Zip Code

When did the child start living here? (*date*) _____

Who does the child live with? Me Someone else (*name*) _____

Child 3: _____
First Middle Last DOB

Address City, State, Zip Code

When did the child start living here? (*date*) _____

Who does the child live with? Me Someone else (*name*) _____

2. **Nevada Residence.** How long have the children lived in Nevada? (*check one*)

The children have lived in Nevada for the past six months, or since birth.

The children have NOT lived in Nevada for the past six months.

3. **Past Residences.** List the other places the children have lived in the last 5 years.

Do not include where the children are living now.

	Who the Child Lived With	City & State Where the Child Lived	Dates Child Lived There (mo/yr – mo/yr)
<i>Examples →</i>	<i>Sue Jones (mom)</i>	<i>Las Vegas, NV</i>	<i>i.e., 5/18-9/18</i>
Past Residence:			_____ - _____
Past Residence:			_____ - _____
Past Residence:			_____ - _____

If the children lived with anyone *other than the parents* in the last 5 years, write their names and current addresses here: _____

4. **Department of Family Services (“DFS”) / Child Protective Services (“CPS”).** Has DFS / CPS been involved with your family? (*check one*)

No.

Yes. When: _____ Caseworker’s name: _____

5. **Current Custody Case.** Is there a custody order? (*check one*)

No.

Yes, there is a current custody order concerning the child. The order is from case (*case number*)_____. It was issued in (*county*)_____
County in the State of_____.

6. **Your Participation in Other Cases Concerning the Child.** Have you participated in a case concerning the child as a party, witness, or in some other capacity? (*check one*)

No.

Yes, I have participated in the following cases concerning the child (*list the state, the court name, the case number and the date of the child custody order, if any*):

7. **Your Knowledge of Other Cases that You Did Not Participate In.** Do you know of any other case concerning the child that could affect this case, such as other custody cases, protection order cases, or adoptions/terminations? (*check one*)

No.

Yes, the following cases that could affect this case (*list the state, the court name, the parties involved, the case number and the type of case*):

8. **Persons Other Than You or the Other Party Who Can Claim Custody / Visitation.**

Is there anyone other than you or the adverse party who has custody of the child or who can claim a right to custody or visitation with the child? (*check one*)

No.

Yes, the following people have custody or can claim custody/visitation of the child: (*list names and addresses of anyone who claims custody/visitation rights*):

9. **Confidentiality.** Would your health/safety/liberty or the child's health/safety/liberty be in danger if the information in this document is released to the adverse party? (*check one*)

Yes. This document should be sealed pursuant to NRS 125A.385(5). **Note: the court may release this information to the other party after a hearing if the court orders the disclosure.**

No. This document may be provided to the adverse party.

10. This document does not contain the personal information of any person as defined by NRS 603A.040.

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

DATED _____, 20____.

Submitted By: (*your signature*) _____

(*print your name*) _____