

**PETITION TO ESTABLISH VISITATION RIGHTS**

**PRO SE WORKSHOP**

This packet contains information needed to file a Petition to Establish Visitation rights when you have not legally been given visitation rights by the Court for your minor child/children.

Before you being completing the appropriate forms to take legal action, you must review the court file that concerns you and the child (for example the one that named you as the father of the child and/or ordered you to pay child support). You will find this file in the clerk's office of the courthouse that heard your case. You should review **EVERYTHING** in this file and make copies of all the orders and judgments.

You should have one of the following (1) Final Decree of Divorce, (2) A Judgment Determining Support, or (3) Judgment approving Stipulated Agreement of Support and Admission of Paternity. Attach a copy to your petition.

Now that you are familiar with your court file, you are ready to file for legal action with the court.

**MAKE SURE TO MAKE COPIES OF THE BLANK FORMS ENCLOSED IN THIS PACKET IN CASE YOU MAKE A MISTAKE.**

**CHECKLIST**

**YOU SHOULD HAVE THE FOLLOWING DOCUMENTS IN THIS PACKAGE:**

1. PETITION TO ESTABLISH VISITATION RIGHTS/PRO-SE WORKSHOP (PAGE 1)
2. IMPORTANT NOTICES (PAGE 2)
3. SAMPLE COVER SHEET & BLANK COVER SHEET (PAGES 3&4)
4. SAMPLE PETITION TO ESTABLISH VISITATION RIGHTS (PAGES 5&6)
5. BLANK PETITION TO ESTABLISH VISITATION RIGHTS (PAGES 7&8)
6. SAMPLE SUMMONS & BLANK SUMMONS (PAGES 9&10)
7. SHERIFF'S RETURN (PAGE 11)
8. INSTRUCTIONS FOR A JUDGMENT FOR GRANTING VISITATION (PAGE 12)
9. TWO OPTIONS FOR A JUDGMENT GRANTING VISITATION (PAGE 13)
10. BLANK JUDGMENT FOR VISITATION (PAGE 14)
11. PAUPER'S OATH (PAGE 15)

## PETITION TO ESTABLISH VISITATION RIGHTS

### IMPORTANT NOTICES

1. Do not take any of these papers to the Department of Human Services. The department cannot and will not help you complete these forms or deliver them to the custodial parent.
2. You must be on time for the court hearing. Be clean and neatly dressed (church attire is appropriate). Also, do not chew gum or bring your cell phone to court.
3. Be respectful to the judge. Be sure to say “yes sir”, “yes ma’am”, or “your honor” when you speak to the judge. Remember to act appropriately at all times, even if other parties in the case do not. This helps the judge see you as a responsible adult that should be allowed time with your child(ren).
4. This packet will refer to the custodial parent repeatedly throughout. The custodial parent is the person with who the child(ren) reside.
5. **FEES:** Upon filing your papers with the court clerk you will be charged a filing fee. This amount ranges between \$100 and \$150 as of December 2017 and depends on the court you file in. You will also be charged a service to process fee by the Sheriff’s office. This fee is usually \$35 and must be paid to have the sheriff serve the court papers to the custodial parent. **You cannot serve these papers yourself. These fees must be paid when you file your papers with the court.** If you choose to have a private process server serve these papers for you, you have to find one yourself and they must return proof of delivery to the chancery court clerk to file with your petition. Private process servers usually charge a minimum of \$45 to serve papers.

*Please contact the court clerk and sheriff to determine the appropriate methods of payment and exact prices.*

If you cannot afford to pay these fees, the clerk may waive them under very specific circumstances. To try to have these fees waived, you must sign the pauper’s oath, found on page 15, stating that you cannot afford to pay such fees. You may sign this sworn statement before the clerk at the courthouse when you go to file your paperwork there.

<b>COVER SHEET</b>		<b>Civil Case Filing Form</b> <i>(To be completed by Attorney/Party Prior to Filing of Pleading)</i>		<b>Court Identification Docket #</b>		<b>Case Year</b>		<b>Docket Number</b>	
				<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>		<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
				County #    Judicial District    Court ID (CH, CI, CO)				Local Docket ID	
				<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>					
Mississippi Supreme Court Administrative Office of Courts		Form AOC/01 (Rev 2016)		Month    Date    Year				Case Number if filed prior to 1/1/94	
In the <u>CHANCERY</u>		Court of <u>HINDS</u>		County — <u>FIRST</u>		Judicial District			
<b>Origin of Suit (Place an "X" in one box only)</b>									
<input checked="" type="checkbox"/> Initial Filing		<input type="checkbox"/> Reinstated		<input type="checkbox"/> Foreign Judgment Enrolled		<input type="checkbox"/> Transfer from Other court		<input type="checkbox"/> Other	
<input type="checkbox"/> Remanded		<input type="checkbox"/> Reopened		<input type="checkbox"/> Joining Suit/Action		<input type="checkbox"/> Appeal			
<b>Plaintiff - Party(ies) Initially Bringing Suit Should Be Entered First - Enter Additional Plaintiffs on Separate Form</b>									
Individual <u>YOUR NAME</u>									
Last Name		First Name		Maiden Name, if applicable		M.I.		Jr/Sr/III/IV	
<input type="checkbox"/> Check ( x ) if Individual Plaintiff is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style: Estate of _____									
<input type="checkbox"/> Check ( x ) if Individual Plaintiff is acting in capacity as Business Owner/Operator (d/b/a) or State Agency, and enter entity: D/B/A or Agency _____									
Business _____									
<input type="checkbox"/> Check ( x ) if Business Plaintiff is filing suit in the name of an entity other than the above, and enter below: D/B/A _____									
Address of Plaintiff _____									
Attorney (Name & Address) _____								MS Bar No. _____	
<input checked="" type="checkbox"/> Check ( x ) if Individual Filing Initial Pleading is NOT an attorney									
Signature of Individual Filing: _____									
<b>Defendant - Name of Defendant - Enter Additional Defendants on Separate Form</b>									
Individual <u>CUSTODIAL PARENT NAME</u>									
Last Name		First Name		Maiden Name, if applicable		M.I.		Jr/Sr/III/IV	
<input type="checkbox"/> Check ( x ) if Individual Defendant is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style: Estate of _____									
<input type="checkbox"/> Check ( x ) if Individual Defendant is acting in capacity as Business Owner/Operator (d/b/a) or State Agency, and enter entity: D/B/A or Agency _____									
Business _____									
<input type="checkbox"/> Check ( x ) if Business Defendant is acting in the name of an entity other than the above, and enter below: D/B/A _____									
Attorney (Name & Address) - If Known _____								MS Bar No. _____	
<input type="checkbox"/> Check ( x ) if child support is contemplated as an issue in this suit.* *If checked, please submit completed Child Support Information Sheet with this Cover Sheet									
<b>Nature of Suit (Place an "X" in one box only)</b>			<input type="checkbox"/> Alcohol/Drug Commitment (Voluntary)			<b>Real Property</b>			
<input type="checkbox"/> Other			<input type="checkbox"/> Other			<input type="checkbox"/> Adverse Possession			
<b>Domestic Relations</b>			<b>Business/Commercial</b>			<input type="checkbox"/> Ejectment			
<input checked="" type="checkbox"/> Child Custody/Visitation			<input type="checkbox"/> Accounting (Business)			<input type="checkbox"/> Eminent Domain			
<input type="checkbox"/> Child Support			<input type="checkbox"/> Business Dissolution			<input type="checkbox"/> Eviction			
<input type="checkbox"/> Contempt			<input type="checkbox"/> Debt Collection			<input type="checkbox"/> Judicial Foreclosure			
<input type="checkbox"/> Divorce: Fault			<input type="checkbox"/> Employment			<input type="checkbox"/> Lien Assertion			
<input type="checkbox"/> Divorce: Irreconcilable Diff.			<input type="checkbox"/> Foreign Judgment			<input type="checkbox"/> Partition			
<input type="checkbox"/> Domestic Abuse			<input type="checkbox"/> Garnishment			<input type="checkbox"/> Tax Sale: Confirm/Cancel			
<input type="checkbox"/> Emancipation			<input type="checkbox"/> Replevin			<input type="checkbox"/> Title Boundary or Easement			
<input type="checkbox"/> Modification			<input type="checkbox"/> Other			<input type="checkbox"/> Other			
<input type="checkbox"/> Paternity			<b>Probate</b>			<b>Torts</b>			
<input type="checkbox"/> Property Division			<input type="checkbox"/> Accounting (Probate)			<input type="checkbox"/> Bad Faith			
<input type="checkbox"/> Separate Maintenance			<input type="checkbox"/> Birth Certificate Correction			<input type="checkbox"/> Fraud			
<input type="checkbox"/> Term. of Parental Rights-Chancery			<input type="checkbox"/> Mental Health Commitment			<input type="checkbox"/> Intentional Tort			
<input type="checkbox"/> UIFSA (eff 7/1/97; formerly URESA)			<input type="checkbox"/> Conservatorship			<input type="checkbox"/> Loss of Consortium			
<input type="checkbox"/> Other			<input type="checkbox"/> Guardianship			<input type="checkbox"/> Malpractice - Legal			
<b>Appeals</b>			<input type="checkbox"/> Heirship			<input type="checkbox"/> Malpractice - Medical			
<input type="checkbox"/> Administrative Agency			<input type="checkbox"/> Intestate Estate			<input type="checkbox"/> Mass Tort			
<input type="checkbox"/> County Court			<input type="checkbox"/> Minor's Settlement			<input type="checkbox"/> Negligence - General			
<input type="checkbox"/> Hardship Petition (Driver License)			<input type="checkbox"/> Muniment of Title			<input type="checkbox"/> Negligence - Motor Vehicle			
<input type="checkbox"/> Justice Court			<input type="checkbox"/> Name Change			<input type="checkbox"/> Premises Liability			
<input type="checkbox"/> MS Dept Employment Security			<input type="checkbox"/> Testate Estate			<input type="checkbox"/> Product Liability			
<input type="checkbox"/> Municipal Court			<input type="checkbox"/> Will Contest			<input type="checkbox"/> Subrogation			
<input type="checkbox"/> Other			<input type="checkbox"/> Alcohol/Drug Commitment (Involuntary)			<input type="checkbox"/> Wrongful Death			
						<input type="checkbox"/> Other			

<b>COVER SHEET</b>		<b>Civil Case Filing Form</b>		<i>(To be completed by Attorney/Party Prior to Filing of Pleading)</i>	
Mississippi Supreme Court Administrative Office of Courts		Form AOC/01 (Rev 2016)		This area to be completed by clerk	
In the _____ Court of _____ County — _____ Judicial District		Case Year _____		Docket Number _____ Local Docket ID _____	
<b>Origin of Suit (Place an "X" in one box only)</b>		County # _____ Judicial District _____ Court ID (CH, CI, CO) _____		Case Number if filed prior to 1/1/94 _____	
<input type="checkbox"/> Initial Filing <input type="checkbox"/> Reinstated <input type="checkbox"/> Foreign Judgment Enrolled <input type="checkbox"/> Transfer from Other court <input type="checkbox"/> Other <input type="checkbox"/> Remanded <input type="checkbox"/> Reopened <input type="checkbox"/> Joining Suit/Action <input type="checkbox"/> Appeal					
<b>Plaintiff - Party(ies) Initially Bringing Suit Should Be Entered First - Enter Additional Plaintiffs on Separate Form</b>					
<b>Individual</b>					
_____ Last Name		_____ First Name		_____ Maiden Name, if applicable	_____ M.I.
_____ Jr/Sr/III/IV		___ Check ( x ) if Individual Plaintiff is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style: Estate of _____ ___ Check ( x ) if Individual Plaintiff is acting in capacity as Business Owner/Operator (d/b/a) or State Agency, and enter entity: D/B/A or Agency _____			
<b>Business</b>					
_____ Enter legal name of business, corporation, partnership, agency - If Corporation, indicate the state where incorporated ___ Check ( x ) if Business Plaintiff is filing suit in the name of an entity other than the above, and enter below: D/B/A _____					
<b>Address of Plaintiff</b> _____					
<b>Attorney (Name &amp; Address)</b> _____				<b>MS Bar No.</b> _____	
___ Check ( x ) if Individual Filing Initial Pleading is NOT an attorney Signature of Individual Filing: _____					
<b>Defendant - Name of Defendant - Enter Additional Defendants on Separate Form</b>					
<b>Individual</b>					
_____ Last Name		_____ First Name		_____ Maiden Name, if applicable	_____ M.I.
_____ Jr/Sr/III/IV		___ Check ( x ) if Individual Defendant is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style: Estate of _____ ___ Check ( x ) if Individual Defendant is acting in capacity as Business Owner/Operator (d/b/a) or State Agency, and enter entity: D/B/A or Agency _____			
<b>Business</b>					
_____ Enter legal name of business, corporation, partnership, agency - If Corporation, indicate the state where incorporated ___ Check ( x ) if Business Defendant is acting in the name of an entity other than the above, and enter below: D/B/A _____					
<b>Attorney (Name &amp; Address) - If Known</b> _____				<b>MS Bar No.</b> _____	
___ Check ( x ) if child support is contemplated as an issue in this suit.* *If checked, please submit completed Child Support Information Sheet with this Cover Sheet					
<b>Nature of Suit (Place an "X" in one box only)</b>			<input type="checkbox"/> Alcohol/Drug Commitment (voluntary)		<input type="checkbox"/> Other
<input type="checkbox"/> Domestic Relations			<input type="checkbox"/> Children/Minors - Non-Domestic		<input type="checkbox"/> Real Property
<input type="checkbox"/> Child Custody/Visitation <input type="checkbox"/> Child Support <input type="checkbox"/> Contempt <input type="checkbox"/> Divorce: Fault <input type="checkbox"/> Divorce: Irreconcilable Diff. <input type="checkbox"/> Domestic Abuse <input type="checkbox"/> Emancipation <input type="checkbox"/> Modification <input type="checkbox"/> Paternity <input type="checkbox"/> Property Division <input type="checkbox"/> Separate Maintenance <input type="checkbox"/> Term. of Parental Rights-Chancery <input type="checkbox"/> UIFSA (eff 7/1/97; formerly URESA) <input type="checkbox"/> Other _____			<input type="checkbox"/> Adoption - Contested <input type="checkbox"/> Adoption - Uncontested <input type="checkbox"/> Consent to Abortion <input type="checkbox"/> Minor Removal of Minority <input type="checkbox"/> Other _____		<input type="checkbox"/> Adverse Possession <input type="checkbox"/> Ejectment <input type="checkbox"/> Eminent Domain <input type="checkbox"/> Eviction <input type="checkbox"/> Judicial Foreclosure <input type="checkbox"/> Lien Assertion <input type="checkbox"/> Partition <input type="checkbox"/> Tax Sale: Confirm/Cancel <input type="checkbox"/> Title Boundary or Easement <input type="checkbox"/> Other _____
<input type="checkbox"/> Appeals			<input type="checkbox"/> Civil Rights		<input type="checkbox"/> Torts
<input type="checkbox"/> Administrative Agency <input type="checkbox"/> County Court <input type="checkbox"/> Hardship Petition (Driver License) <input type="checkbox"/> Justice Court <input type="checkbox"/> MS Dept Employment Security <input type="checkbox"/> Municipal Court <input type="checkbox"/> Other _____			<input type="checkbox"/> Elections <input type="checkbox"/> Expungement <input type="checkbox"/> Habeas Corpus <input type="checkbox"/> Post Conviction Relief/Prisoner <input type="checkbox"/> Other _____		<input type="checkbox"/> Bad Faith <input type="checkbox"/> Fraud <input type="checkbox"/> Intentional Tort <input type="checkbox"/> Loss of Consortium <input type="checkbox"/> Malpractice - Legal <input type="checkbox"/> Malpractice - Medical <input type="checkbox"/> Mass Tort <input type="checkbox"/> Negligence - General <input type="checkbox"/> Negligence - Motor Vehicle <input type="checkbox"/> Premises Liability <input type="checkbox"/> Product Liability <input type="checkbox"/> Subrogation <input type="checkbox"/> Wrongful Death <input type="checkbox"/> Other _____
<input type="checkbox"/> Business/Commercial			<input type="checkbox"/> Contract		
<input type="checkbox"/> Accounting (Business) <input type="checkbox"/> Business Dissolution <input type="checkbox"/> Debt Collection <input type="checkbox"/> Employment <input type="checkbox"/> Foreign Judgment <input type="checkbox"/> Garnishment <input type="checkbox"/> Replevin <input type="checkbox"/> Other _____			<input type="checkbox"/> Breach of Contract <input type="checkbox"/> Installment Contract <input type="checkbox"/> Insurance <input type="checkbox"/> Specific Performance <input type="checkbox"/> Other _____		
<input type="checkbox"/> Probate			<input type="checkbox"/> Statutes/Rules		
<input type="checkbox"/> Accounting (Probate) <input type="checkbox"/> Birth Certificate Correction <input type="checkbox"/> Mental Health Commitment <input type="checkbox"/> Conservatorship <input type="checkbox"/> Guardianship <input type="checkbox"/> Heirship <input type="checkbox"/> Intestate Estate <input type="checkbox"/> Minor's Settlement <input type="checkbox"/> Muniment of Title <input type="checkbox"/> Name Change <input type="checkbox"/> Testate Estate <input type="checkbox"/> Will Contest <input type="checkbox"/> Alcohol/Drug Commitment (involuntary)			<input type="checkbox"/> Bond Validation <input type="checkbox"/> Civil Forfeiture <input type="checkbox"/> Declaratory Judgment <input type="checkbox"/> Injunction or Restraining Order <input type="checkbox"/> Other _____		

You will need to bring the original petition and TWO (2) copies of the petition to the court to be filed. The original will be put in the Court's file. One copy will be attached to the Summons that is served to the custodial parent. The last copy is to keep for your records.

SAMPLE

IN THE CHANCERY/COUNTY COURT OF CHILD SUPPORT COUNTY, MISSISSIPPI  
FIRST/SECOND JUDICIAL DISTRICT

YOUR NAME \_\_\_\_\_

PETITIONER

VS

CIVIL ACTION  
CAUSE NO. \_\_\_\_\_

CUSTODIAL PARENT NAME \_\_\_\_\_

RESPONDENT

**PETITION TO ESTABLISH VISITATION RIGHTS**

The Petitioner states his/her claim for establishment of visitation rights with the below reference minor child(ren) as follows:

1. YOUR NAME \_\_\_\_\_, hereinafter referred to as the Petitioner, is an adult resident citizen of YOUR COUNTY, County, Mississippi, whose address is YOUR ADDRESS \_\_\_\_\_.
2. The Respondent is subject to the jurisdiction of the Court and may be served with a copy of the complaint and summons at 321 FIRST AVENUE, JACKSON, MISSISSIPPI, 39204 \_\_\_\_\_.
3. The Respondent presently has legal custody of the minor child(ren):
 

CHILD'S NAME \_\_\_\_\_ born DATE OF BIRTH \_\_\_\_\_

CHILD'S NAME \_\_\_\_\_ born DATE OF BIRTH \_\_\_\_\_

CHILD'S NAME \_\_\_\_\_ born DATE OF BIRTH \_\_\_\_\_
4. Petitioner admits that he is the father of the above referenced minor child(ren) and as such should be granted visitation rights with the minor child(ren).
5. Petition is a fit and proper person to have visitation with his child(ren).
6. Visitation by the Petitioner is in the best interest of the minor child(ren).

THEREFORE, Petitioner respectfully requests and moves the Court to name the Petitioner as the father of the minor child(ren) and grant Petition general and generous rights of visitation with the minor child(ren).

Respectfully submitted,

**YOUR SIGNATURE**

**YOUR NAME**, Pro Se Petitioner

**YOUR NAME**

Petitioner (Pro Se)

**YOUR ADDRESS**

**YOUR ADDRESS**

Telephone: **YOUR PHONE NUMBER**

STATE OF **MISSISSIPPI**  
COUNTY OF **YOUR COUNTY**

This day personally appeared before me, the undersigned authority in and for the county and state aforesaid, within my jurisdiction, and above and within named **YOUR NAME**, who being before me duly sworn, on oath states that he signed executed and delivered the above and foregoing Petition to Establish Visitation Rights on the day and date mentioned therein and for the purposes contained therein, as his free and voluntary act and deed and the facts, things, and matters contained therein, are true and correct therein stated.

SWORN TO THE SUBSCRIBED BEFORE ME this the **CURRENT DATE** day of **CURRENT MONTH, CURRENT YEAR.**

**NOTARY'S SIGNATURE**  
NOTARY PUBLIC

My Commission Expires:

**NOTARY'S STAMP AND SEAL**

**(DO NOT SIGN UNLESS YOU ARE STANDING BEFORE THE NOTARY)**

**IMPORTANT!!!**

**BE SURE YOU ATTACH A COPY OF THE CHILD SUPPORT ORDER THAT NAMED YOU THE FATHER TO THE BACK OF THE PETITION.**

IN \_\_\_\_\_ COURT OF \_\_\_\_\_ COUNTY, MISSISSIPPI  
\_\_\_\_\_ JUDICIAL DISTRICT

\_\_\_\_\_  
VS  
\_\_\_\_\_  
PETITIONER  
CIVIL ACTION  
CAUSE NO. \_\_\_\_\_  
RESPONDENT

**PETITION TO ESTABLISH VISITATION RIGHTS**

The Petitioner states his/her claim for establishment of visitation rights with the below reference minor child(ren) as follows:

1. \_\_\_\_\_, hereinafter referred to as the Petitioner, is an adult resident citizen of \_\_\_\_\_, County, Mississippi, whose address is \_\_\_\_\_.
2. The Respondent is subject to the jurisdiction of the Court and may be served with a copy of the petition and summons at \_\_\_\_\_.
3. The Respondent presently has legal custody of the minor child(ren):  
\_\_\_\_\_ born \_\_\_\_\_  
\_\_\_\_\_ born \_\_\_\_\_  
\_\_\_\_\_ born \_\_\_\_\_
4. Petitioner admits that he is the father of the above referenced minor child(ren) and as such should be granted visitation rights with the minor child(ren).
5. Petitioner is a fit and proper person to have visitation rights with child(ren).
6. Visitation by the petitioner is in the best interest of the minor child(ren).

THEREFORE, Petitioner respectfully requests and moves the Court to name the Petitioner as the father of the minor child(ren) and grant Petition general and generous rights of visitation with the minor child(ren).

Respectfully submitted,

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_, Pro Se Petitioner

**PRINT**

\_\_\_\_\_  
Petitioner Pro Se

\_\_\_\_\_  
Telephone: \_\_\_\_\_

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

This day personally appeared before me, the undersigned authority in and for the county and state aforesaid, within my jurisdiction, and above and within named \_\_\_\_\_, who being before me duly sworn, on oath states that he signed executed and delivered the above and foregoing Petition to Establish Visitation Rights on the day and date mentioned therein and for the purposes contained therein, as his free and voluntary act and deed and the facts, things, and matters contained therein, are true and correct therein stated.

SWORN TO THE SUBSCRIBED BEFORE ME this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

My Commission Expires:



**SAMPLE**

IN THE **CHANCERY** COURT OF **NAME OF COUNTY** COUNTY, MISSISSIPPI  
**FIRST/SECOND** JUDICIAL DISTRICT

**YOUR NAME** \_\_\_\_\_

PETITIONER

VS

CIVIL ACTION

CAUSE NO. **G2017-123**

**CUSTODIAL PARENT NAME** \_\_\_\_\_

RESPONDENT

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SUMMONS

THE STATE OF MISSISSIPPI

TO: **CUSTODIAL PARENT**  
**HOME ADDRESS**  
**CITY, STATE ZIP**

TO: **CUSTODIAL PARENT**  
**WORK ADDRESS**  
**CITY, STATE ZIP**

THE LEGAL PLEADINGS WHICH ARE ATTACHED TO THIS SUMMONS ARE IMPORTANT AND YOU MUST TAKE IMMEDIATE ACTION TO PROTECT YOUR RIGHTS.

YOU ARE SUMMONED TO APPEAR AT **TIME** O’CLOCK **AM/PM** ON **DAY OF WEEK** THE **DATE OF MONTH** DAY OF **MONTH, YEAR** IN THE **COUNTY NAME** COUNTY **CHANCERY/COUNTY COURTHOUSE** BEFORE HONORABLE **NAME OF JUDGE** LOCATED AT **ADDRESS OF COURTHOUSE**, IN THE CITY OF **NAME OF CITY**, MISSISSIPPI. IF YOU FAIL TO APPEAR AND DEFEND YOURSELF A JUDGMENT WILL BE ENTERED AGAINST YOU OR THE MONEY OR OTHER RELIEF DEMANDED IN THE PLEADINGS ATTACHED HERETO.

YOU ARE NOT REQUIRED TO FILE AN ANSWER OR OTHER RESPONSIVE PLEADING BUT YOU MAY DO SO IF YOU DESIRE.

\_\_\_\_\_  
CLERK OF THE \_\_\_\_\_ COURT  
OF \_\_\_\_\_ COUNTY, MISSISSIPPI  
BY: \_\_\_\_\_, D.C.

IN THE \_\_\_\_\_ COURT OF \_\_\_\_\_ COUNTY, MISSISSIPPI  
\_\_\_\_\_ JUDICIAL DISTRICT

\_\_\_\_\_  
VS  
\_\_\_\_\_

PETITIONER  
CIVIL ACTION  
CAUSE NO. \_\_\_\_\_  
RESPONDENT

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SUMMONS

THE STATE OF MISSISSIPPI

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TO: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

THE LEGAL PLEADINGS WHICH ARE ATTACHED TO THIS SUMMONS ARE IMPORTANT AND YOU MUST TAKE IMMEDIATE ACTION TO PROTECT YOUR RIGHTS.

YOU ARE SUMMONED TO APPEAR AT \_\_\_\_\_ O'CLOCK \_\_\_\_\_ ON \_\_\_\_\_ THE \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_ IN THE \_\_\_\_\_ COUNTY COURTHOUSE BEFORE HONORABLE \_\_\_\_\_, LOCATED AT \_\_\_\_\_, IN THE CITY OF \_\_\_\_\_, MISSISSIPPI. IF YOU FAIL TO APPEAR AND DEFEND YOURSELF A JUDGMENT WILL BE ENTERED AGAINST YOU OR THE MONEY OR OTHER RELIEF DEMANDED IN THE PLEADINGS ATTACHED HERETO.

YOU ARE NOT REQUIRED TO FILE AN ANSWER OR OTHER RESPONSIVE PLEADING, BUT YOU MAY DO SO IF YOU DESIRE.

ISSUED UNDER MY HAND AND SEAL OR COURT, THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
CLERK OF THE \_\_\_\_\_ COURT  
OF \_\_\_\_\_ COUNTY, MISSISSIPPI  
BY: \_\_\_\_\_, D.C.

SHERIFF'S RETURN

STATE OF MISSISSIPPI  
COUNTY OF \_\_\_\_\_

( ) PERSONALLY DELIVERED COPIES OF THE SUMMONS AND PETITION ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_ TO \_\_\_\_\_ IN THE \_\_\_\_\_ COUNTY OF \_\_\_\_\_.

( ) AFTER EXERCISING REASONABLE DILIGENCE I WAS ABLE TO DELIVER COPIES OF THE SUMMONS AND PETITION TO \_\_\_\_\_ WITHIN \_\_\_\_\_ COUNTY, MISSISSIPPI. I SERVED THE SUMMONS AND PETITION ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_ AT THE USUAL PLACE OF THE ABODE OR EMPLOYMENT OF SAID, BY LEAVING A TRUE COPY OF THE SUMMONS AND COMPLAINT WITH \_\_\_\_\_, WHO IS THE \_\_\_\_\_ (FAMILY MEMBER OR EMPLOYMENT SUPERVISOR), AS THE CASE MAY BE ABOVE THE AGE OF SIXTEEN (16) YEARS AND WILLING TO RECEIVE THE SUMMONS AND COMPLAINT. THEREAFTER, ON THE \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_, I MAILED (BY FIRSTCLASS MAIL, POSTAGE PREPAID) COPIES TO THE PERSON SERVED AT THE DEFENDANT'S USUAL PLACE OF ABODE OR EMPLOYMENT, WHERE THE COPIES WERE LEFT.

( ) I WAS UNABLE TO SERVE THE SUMMONS AND PETITION BECAUSE:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_ SHERIFF OF \_\_\_\_\_, COUNTY, MISSISSIPPI.

BY: \_\_\_\_\_  
DEPUTY SHERIFF

**IF THE COPY OF THE SUMMONS AND PETITION ARE NOT DELIVERED TO THE RESPONDENT AS PER THIS SUMMONS' INSTRUCTIONS ON RESIDENTIAL AND EMPLOYMENT SERVICE, THE CASE CANNOT BE HEARD ON THAT DAY.**

## **INSTRUCTIONS FOR A JUDGMENT GRANTING VISITATION**

If you are able to properly serve the custodial parent and the Court hears your case an order will likely be given by the Court. This document is what must be completed for the order to be entered and enforceable.

You **must fill out** the Heading of The Judgment exactly the same as the Heading for the Petition.

You **must sign** the Judgment at the bottom under where it says "Prepared by". On the line under that, please print your name exactly as it appears in the heading.

The Judge will be able to complete the rest of the order for you.

**Once the Judge signs the order have it filed with the court clerk.**

Attached to this packet are two different sample judgments, present both to the judge.

IN THE \_\_\_\_\_ COURT OF \_\_\_\_\_ COUNTY, MISSISSIPPI  
\_\_\_\_\_ JUDICIAL DISTRICT

\_\_\_\_\_  
VS

PETITIONER  
CIVIL ACTION  
CAUSE NO. \_\_\_\_\_

\_\_\_\_\_

RESPONDENT

**JUDGMENT GRANTING VISITATION**

This cause came on to be heard on the \_\_\_\_\_ day of \_\_\_\_\_,  
\_\_\_\_\_. The court having jurisdiction over the parties and subject matter, FINDS, RULES  
and ADJUDGES.

1. The Court finds that the Petitioner is the parent of the following named child(ren).

\_\_\_\_\_ born \_\_\_\_\_

\_\_\_\_\_ born \_\_\_\_\_

\_\_\_\_\_ born \_\_\_\_\_

The Petitioner is a fit and proper person to have visitation rights with the minor child(ren)  
and it is in the best interest of the child(ren) that visitation be granted.

2. Therefore the Court grants the Petitioner general and reasonable visitation rights with the  
child(ren) as set forth in the standard visitation schedule which is attached hereto and  
incorporated herein by reference.
3. The Respondent is ordered to comply with provisions of this Judgment and allow the  
visitation as set forth herein.

SO ORDERED AND ADJUDGED THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
CHANCELLOR

PREPARED BY:

\_\_\_\_\_  
PRO SE PETITIONER  
\_\_\_\_\_

IN THE \_\_\_\_\_ COURT OF \_\_\_\_\_ COUNTY, MISSISSIPPI  
\_\_\_\_\_ JUDICIAL DISTRICT

\_\_\_\_\_

PETITIONER

VS

CIVIL ACTION  
CAUSE NO. \_\_\_\_\_

\_\_\_\_\_

RESPONDENT

JUDGMENT GRANTING VISITATION

This cause came on to be heard on the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_. The Court having jurisdiction over the parties and subject matter, FINDS, RULES and ADJUDGES.

1. The Court finds that the Petitioner is the parent of the following named child(ren).

\_\_\_\_\_ born \_\_\_\_\_

\_\_\_\_\_ born \_\_\_\_\_

\_\_\_\_\_ born \_\_\_\_\_

The Petitioner is a fit and proper person to have visitation rights with the minor child(ren) and it is in the best interest of the child(ren) that visitation be granted.

2. Therefore the Court grants the Petitioner general and reasonable visitation rights as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. The Respondent is ordered to comply with provisions of this Judgment and allow the visitation as set forth herein

SO ORDERED AND ADJUDGED THIS THE \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
CHANCELLOR

PREPARED BY:

\_\_\_\_\_  
PRO SE PETITIONER  
\_\_\_\_\_

PAUPER'S OATH

STATE OF MISSISSIPPI  
COUNTY OF \_\_\_\_\_

I, \_\_\_\_\_, do solemnly swear that I am a citizen of the State of Mississippi, and because of my poverty, I am not able to pay to costs or give security for the same in the suit \_\_\_\_\_ which I have this day filed, and that to the best of my belief, I am entitled to the redress which I seek by such suit.

WITNESS MY SIGNATURE this the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Petitioner

N.B. pursuant of Section 6906-03 as amended by Senate Bill No. 1519, laws of 1971

STATE OF MISSISSIPPI  
COUNTY OF \_\_\_\_\_

Personally appeared before me, the undersigned authority in and for the aforesaid county and state, \_\_\_\_\_, who acknowledged that she/he signed and delivered the foregoing instruction on the day and year shown and for the purposes therein expressed.

GIVEN UNDER MY HAND AND SEAL the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
NOTARY PUBLIC

My Commission Expires:

IN THE CHANCERY COURT OF \_\_\_\_\_ COUNTY, MISSISSIPPI

\_\_\_\_\_  
VS  
\_\_\_\_\_

PLANTIFF(S)/PETITIONER(S)  
CIVIL ACTION NO. \_\_\_\_\_  
DEFENDANT(S)/RESPONDENT(S)

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**FIAT**

This civil action is set for hearing in accordance with MRCP Rule 81(d) on the Compliant or Petition \_\_\_\_\_ on the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ o'clock, a.m., in the Chancery Courtroom of the \_\_\_\_\_ County Courthouse/Chancery Building in \_\_\_\_\_, Mississippi.

Defendant(s)/Respondent(s) (is/are) not required to file an Answer or responsive pleading but may do so if (he/she/they) desire(s). Any financial documents required by Rule 8.05 of the Uniform Chancery Court Rules shall be mailed to counsel the opposing party no later than three days before the hearing.

Process accordance with this Fiat shall issue for the Defendant(s)/Respondent(s).

**SO ORDERED AND ADJUDGED**, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
CHANCELLOR

OR

BY: \_\_\_\_\_  
C.C.A.



NAMES OF ALL THE ATTORNEYS INVOLVED:

\_\_\_\_\_  
ATTORNEY FOR \_\_\_\_\_

TELEPHONE –

FACSIMILE –

\_\_\_\_\_  
ATTORNEY FOR \_\_\_\_\_

TELEPHONE –

FACSIMILE –