

Cause Number: _____

[Fill in the cause number and court information exactly as written on the filed Petition to Modify.]

In the Interest of the Following Minor Child(ren):

[Print the initials of each child below.]

In the _____

[Write court number above.]

1. _____
2. _____
3. _____
4. _____
5. _____

☐ District Court

☐ County Court at Law

[Write county name above.]

State of Texas

Counter-Petition to Modify the Parent-Child Relationship

My name is: _____
First Middle Last

I am the **Respondent and Counter-Petitioner**, the person asking the Court to make orders about the child or children named below.

My driver's license was issued in [State] _____. The last three numbers of my driver's license number are: ____ _.

Or ☐ I do not have a driver's license.

The last three numbers of my social security number are: ____ _.

Or ☐ I do not have a social security number.

1. Discovery Level

The discovery level in this case, if needed, is Level 2.

2. Jurisdiction

The current court order about the child(ren) was made by this Court or transferred to this Court. This Court has continuing exclusive jurisdiction over this case.

3. Child(ren)

I ask the Court to make orders about the following child(ren):

	Child's name	Date of Birth	County and State where child lives now
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____

4. Request to Change Current Order

I ask the Court to change the current order about the child(ren).

The title of the current order is: _____.
[Note: You will usually find the title of the current order on the 1st page of the order under the case information box.]

The Court signed the current order on [Date]: _____.

5. Standing

Read the law about Standing here: Texas Family Code 156.002, 102.003, 102.004, and 102.006.

The law allows me to file this case because I am: [Check one.]

- ☐ the child(ren)'s Mother.
- ☐ the child(ren)'s Father.
- ☐ a person who has had exclusive care, control, and possession of the child(ren) for at least 6 months ending not more than 90 days before the date this Counter-Petition is filed with the Court. I am not a foster parent, relative, or designated caregiver placement from DFPS.
- ☐ a foster parent, relative, or designated caregiver of a child placed by DFPS in my home for at least 12 months ending not more than 90 days preceding the date this Counter-Petition is filed with the Court. The child has not been returned to or placed with their parent and DFPS suit has not been dismissed.
- ☐ the grandparent, great-grandparent, sister, brother, aunt, uncle, niece, nephew, great aunt or uncle, first cousin, or grand niece or nephew of the child(ren) and:
[Check the box below that applies to your case.]
 - ☐ both parents are dead.
 - ☐ both parents, the surviving parent, or managing conservator agree to me filing this case.
 - ☐ the child(ren)'s present circumstances will significantly impair (harm) the child(ren)'s physical health or emotional development. Affidavit for Standing of Nonparent attached as Exhibit A.
- ☐ other: _____

6. Are You Asking to Change Custody within One Year?

Read the law about changing custody within one year here: Texas Family Code 156.102.

[Check one.]

- ☐ I **am not** asking to change primary custody.
- ☐ I **am** asking to change primary custody but it has been **more than** one year since the custody order was made by the Court.
- ☐ I **am** asking to change primary custody and it has been **less than** one year since the custody order was made by the Court. I understand I must fill out and attach a Declaration in Support of Changing Primary Custody within One Year form to this Petition. The facts set out in my Declaration will show that: [Check one.]
 - ☐ I am the person with the exclusive right to designate the primary residence of the child(ren).
 - ☐ the person with the exclusive right to designate the primary residence of the child(ren) has agreed to change primary custody of the child(ren).
 - ☐ the person with the exclusive right to designate the primary residence of the child(ren) has voluntarily given up primary care and possession of the child(ren) for at least 6 months. This was not due to military deployment.
 - ☐ the child(ren)'s present environment may endanger (harm) the child(ren)'s physical health or significantly harm the child(ren)'s emotional development.

7. Counter-Respondent(s)

Petitioner/Counter-Respondent

Petitioner and Counter-Respondent's name is: _____.
Print Petitioner/Counter-Respondent's full name.

Counter-Respondent is the child(ren)'s: [Check one.]

☐ Mother ☐ Father ☐ Other: _____
Print Petitioner/Counter-Respondent A's relationship to the child(ren).

I will deliver a copy of this document to the Petitioner/Counter-Respondent as required by Texas Rules of Civil Procedure Rule 21a.

If the Petitioner/Counter-Respondent has a lawyer, I will deliver it to their lawyer instead of directly to the Petitioner/Counter-Respondent.

Counter-Respondent B [Check one.]

☐ There is no Counter-Respondent B. No one else is entitled to notice in this case.
[Skip to section 8: Information Required if a Party Lives Out-of-State]

☐ Counter-Respondent B's name is: _____
Print Counter-Respondent B's full name.

Counter-Respondent B is the child(ren)'s: [Check one.]

☐ Mother ☐ Father ☐ Other: _____
Print Counter-Respondent B's relationship to the child(ren).

I will deliver a copy of this document to Counter-Respondent B, _____,
Print Counter-Respondent B's full name.
as required by Texas Rules of Civil Procedure Rule 21a.

If Counter-Respondent B has a lawyer, I will deliver it to Counter-Respondent B's lawyer instead of directly to the Counter-Respondent.

Counter-Respondent C [Check one.]

☐ There is no Counter-Respondent C. No one else is entitled to notice in this case.
[Skip to section 8: Information Required if a Party Lives Out-of-State]

☐ Counter-Respondent C's name is: _____
Print Counter-Respondent C's full name.

Counter-Respondent C is the child(ren)'s: [Check one.]

☐ Mother ☐ Father ☐ Other: _____
Print Counter-Respondent C's relationship to the child(ren).

I will deliver a copy of this document to Counter-Respondent C, _____,
Print Counter-Respondent C's full name.
as required by Texas Rules of Civil Procedure Rule 21a.

If Counter-Respondent C has a lawyer, I will deliver it to Counter-Respondent C's lawyer instead of directly to the Counter-Respondent.

Counter-Respondent D [Check one.]

☐ There is no Counter-Respondent D. No one else is entitled to notice in this case.
[Skip to section 8: Information Required if a Party Lives Out-of-State]

☐ Counter-Respondent D's name is: _____

Print Counter-Respondent D's full name.

Counter-Respondent D is the child(ren)'s: [Check one.]

☐ Mother ☐ Father ☐ Other: _____
Print Counter-Respondent D's relationship to the child(ren).

I will deliver a copy of this document to Counter-Respondent D, _____,
Print Counter-Respondent D's full name.
as required by Texas Rules of Civil Procedure Rule 21a.

If Counter-Respondent D has a lawyer, I will deliver it to Counter-Respondent D's lawyer instead of directly to the Counter-Respondent.

8. Out-of-State Counter-Respondent(s)

[Check one.]

- ☐ Everyone involved in this case lives in Texas.
- ☐ Someone involved in this case (one of the Counter-Respondents or me) does not live in Texas. I have attached a completed Out-of-State Party Affidavit to this Counter-Petition as an exhibit.

9. Legal Reason for Changing Current Order

(Read the law about when the Court can change an order here: Texas Family Code, Chapter 156.)

The law allows the Court to change the current order because the changes will be in the child(ren)'s best interest and: [Check all that apply.]

- ☐ the Counter-Respondent(s) agree to the changes.
- ☐ the circumstances of the child(ren), a conservator, or other party affected by the current order have materially and substantially changed since the Court made the current order.
- ☐ the child is at least 12 years old and will tell the Court in chambers that they prefer that I have the exclusive right to determine their residence.
- ☐ the conservator who has the exclusive right to designate the primary residence of the child(ren) has voluntarily given up primary care and possession of the child(ren) for at least 6 months. This was not because the conservator is in the military and has been deployed.
- ☐ it has been at least 3 years since the current child support order was made by the Court and the current monthly child support amount differs by at least 20% or \$100 from the monthly child support amount that would be ordered using the Texas Family Code Child Support Guidelines.
- ☐ a person who is a conservator of a child has died (for cases filed on or after September 1, 2021).

10. Conservatorship (Custody)

[Check one.]

- ☐ I do **not** want to change conservatorship (custody). [Skip to section 11.]
- ☐ I ask the Court to change conservatorship (custody) as follows: [Check a, b, c, d, e, or f.]
- a. ☐ Mother and Father should be **Joint Managing Conservators** of the child(ren) and:
[If you checked a, check a-1, a-2, or a-3.]
- a-1. ☐ Father should have the exclusive right to designate the primary residence of the child(ren) within the following geographic area: [Check one.]
- ☐ anywhere. ☐ this county. ☐ this county or county adjacent to this county.
☐ Texas. ☐ other: _____.

- a-2. ☐ Mother should have the exclusive right to designate the primary residence of the child(ren) within the following geographic area: [Check one.]
☐ anywhere. ☐ this county. ☐ this county or county adjacent to this county.
☐ Texas. ☐ other: _____.
- a-3. ☐ Neither parent should have the exclusive right to designate the primary residence of the child(ren) but both parents should be ordered not to remove the child(ren)'s primary residence from the following specific geographic area: [Check one.]
☐ this school district: _____
☐ this county.
☐ this county or county adjacent to this county.
☐ other: _____.

AND [If you checked a, check a-4, a-5, or a-6.]

- a-4. ☐ Father having the exclusive right to designate the school the child(ren) will attend and to enroll the child(ren) in the school, subject to any eligibility or admissions requirements, within the following geographic area: [Check one.]
☐ this school district: _____ ☐ this county.
☐ this county or county adjacent to this county. ☐ other: _____.
- a-5. ☐ Mother having the exclusive right to designate the school the child(ren) will attend and to enroll the child(ren) in the school, subject to any eligibility or admissions requirements, within the following geographic area: [Check one.]
☐ this school district: _____ ☐ this county.
☐ this county or county adjacent to this county. ☐ other: _____.
- a-6. ☐ Neither parent having the exclusive right to designate the school the child(ren) will attend and to enroll the child(ren) in the school, subject to any eligibility or admissions requirements, but both parents ordered not to remove the child(ren)'s school from the following specific geographic area: [Check one.]
☐ this school district: _____ ☐ this county.
☐ this county or county adjacent to this county. ☐ other: _____.

- b. ☐ Mother should be **Sole Managing Conservator** of the child(ren).
c. ☐ Father should be **Sole Managing Conservator** of the child(ren).
d. ☐ _____ should be the **Nonparent Sole Managing Conservator** of the child(ren).
e. ☐ _____ and _____
should be the **Nonparent Joint Managing Conservators** of the child(ren).
f. ☐ Other: [Describe.]

11. Geographic Restriction

[Check one—only if applicable.]

- ☐ I ask the Court to restrict where the child(ren)'s primary residence can be located. The child(ren) should not be moved out of: _____.
- ☐ I ask the Court to change the geographic restriction on where the child(ren)'s primary residence can be located.
The new geographic restriction should be: _____.
- ☐ I ask the Court to lift the geographic restriction on where the child(ren)'s primary residence can be located. There should be no geographic restriction.

12. Child(ren)'s Passports

[Check only if applicable.]

- ☐ I ask the Court to order that I have the exclusive right to apply for and renew passports for the child(ren).

13. Possession and Access (Visitation)

[Check one.]

- ☐ I do **not** want to change possession and access (visitation). [Skip to section 14.]
- ☐ I ask the Court to change possession and access (visitation) as follows: [Check a, b, c or d.]
- a. ☐ Father should have standard visitation. (See Texas Family Code Chapter 153, Subchapter F.)
- b. ☐ Mother should have standard visitation. (See Texas Family Code Chapter 153, Subchapter F.)
- c. ☐ Standard visitation would be unworkable. Possession and access to the child(ren) should be as follows:
- _____
- _____
- _____
- _____
- d. ☐ I am concerned about the safety of the child(ren) with: ☐ Father ☐ Mother
- Therefore, I ask that: [If you checked d, check all that apply below.]
- d-1. ☐ exchanges of the child(ren) be supervised, or in the alternative, be in a public place
- d-2. ☐ that parent's possession of the child(ren) be limited to day visits
- d-3. ☐ that parent's possession of the child(ren) be supervised
- d-4. ☐ that parent have no right to possession or access to the child(ren)
- d-5. ☐ that parent be ordered not to use alcohol or illegal drugs 24 hours prior to or during possession of the child(ren).
- d-6. ☐ that parent's possession and access to the child(ren) be restricted as follows:
- _____
- _____
- _____

[Check only if applicable.]

- ☐ I am concerned that the other parent may take the child(ren) to another country and refuse to return them. I ask the Court to determine if there is a risk of international kidnapping by the other parent and to take such measures as are necessary to protect the child(ren).

14. Child Support

[Check one.]

- ☐ I do **not** want to change current child support. [Skip to section 15.]
- ☐ I ask the Court to change current child support as follows: [Check all that apply.]
- ☐ **Father** should be ordered to pay: [Check one.] ☐ more child support. ☐ less child support.
- ☐ **Mother** should be ordered to pay: [Check one.] ☐ more child support. ☐ less child support.
- ☐ **Other:** [Describe.]

15. Medical Support

[Check one.]

- ☐ I do **not** want to change medical support. [Skip to section 16.]
- ☐ I ask the Court to change the current medical support order as follows: [Check all that apply.]
- ☐ **Father** should be ordered to: [Check one.]
- ☐ provide health insurance for the child(ren) through his employment or another source.
- ☐ pay cash medical support to reimburse the cost of the child(ren)'s health insurance.
- ☐ **Mother** should be ordered to: [Check one.]
- ☐ provide health insurance for the child(ren) through her employment or another source.
- ☐ pay cash medical support to reimburse the cost of the child(ren)'s health insurance.
- ☐ **Other: (Describe)** _____

16. Dental Support [Check one.]

- ☐ I do **not** want to change dental support. [Skip to section 17.]
- ☐ I ask the Court to change or add the current dental support order as follows: [Check all that apply.]
- ☐ **Father** should be ordered to: [Check one.]
- ☐ provide dental insurance for the child(ren) through his employment or another source.
- ☐ pay cash dental support to reimburse the cost of the child(ren)'s dental insurance.
- ☐ **Mother** should be ordered to: [Check one.]
- ☐ provide dental insurance for the child(ren) through her employment or another source.
- ☐ pay cash dental support to reimburse the cost of the child(ren)'s dental insurance.

☐ **Other:** [Describe.]

17. Health Insurance Availability for Child(ren)

The child(ren): [Check all that apply.]

- ☐ do not have health insurance.
☐ have **private health insurance**.

Name of insurance company: _____

Policy number: _____ Cost of premium: \$ _____

Name of person who pays for insurance: _____

The insurance policy ☐ is ☐ is not available through the parent's work.

- ☐ have health insurance through **Medicaid**.
☐ have health insurance through **C.H.I.P.** Cost of premium (if any): \$ _____

If the child(ren) **do not** have private health insurance, also complete the following:

Private health insurance ☐ is ☐ is not available to Father at a reasonable cost.

Private health insurance ☐ is ☐ is not available to Mother at a reasonable cost.

18. Child(ren)'s Dental Insurance

The child(ren): [Check all that apply.]

- ☐ do not have dental insurance.
☐ have **private dental insurance**.

Name of insurance company: _____

Policy number: _____ Cost of premium: \$ _____

Name of person who pays for insurance: _____

The insurance policy ☐ is ☐ is not available through the parent's work.

- ☐ have dental insurance through **Medicaid**.
☐ have dental insurance through **C.H.I.P.** Cost of premium (if any): \$ _____

If the child(ren) **do not** have private dental insurance also complete the following:

Private dental insurance ☐ is ☐ is not available to Father at a reasonable cost.

Private dental insurance ☐ is ☐ is not available to Mother at a reasonable cost.

19. Public Benefits

The child(ren): [Check all that apply.]

- ☐ have Medicaid now **or** had in the past.
☐ get TANF (Temporary Assistance for Needy Families) now **or** got it in the past.

Note: If the child(ren) have ever received Medicaid or TANF, you **MUST** send a copy of this Petition to the Office of the Attorney General Child Support Division. You **MUST** also sign the "Certificate of Service" on the next page.

20. Child(ren)'s Property

[Check one. If the child(ren) have never had any property of significant value, check the first box.]

- ☐ There has been no significant change to the child(ren)'s property.
- ☐ The following changes have occurred to the child(ren)'s property since the Court signed the current orders: _____

21. Protective Order Statement

Note: You **must** provide information about any protective order or pending application for protective order involving a party in this case or a child of a party. This includes information about any: 1) family violence protective order, (2) sexual assault, sexual abuse, trafficking or stalking protective order and/or (3) emergency protective order issued after an arrest.

A "party" includes you (the Counter-Petitioner) and anyone listed as a Counter-Respondent in this Counter-Petition.

You **must also** attach to this Petition a copy of any protective order (even if it's expired) in which one party or a child of a party was the applicant or victim and another party was the respondent or defendant.

If your petition does not accurately reflect whether there is a protective order, the Court may require you to file an amended petition.

[Check the appropriate boxes. Fill in the requested information, if applicable.]

21A. No Protective Order [Check both boxes if neither party has a protective order.]

- ☐ I do not have a protective order, and I have not asked for one.
- ☐ No one has a protective order against me or asked for one.

21B. Pending Protective Order

- ☐ I filed paperwork at the courthouse asking for a protective order, but a judge has not decided if I should get it. I asked for a protective order against _____.
I asked for a protective order on _____ in _____ County, _____ State.
Date Filed _____
The cause number of the protective order case is _____.
If I get a protective order, I will file a copy of it before any hearings in this case.

- ☐ A Counter-Respondent filed paperwork asking for a protective order, but a judge has not decided if the Counter-Respondent will get it. The Counter-Respondent asked for a protective order on _____ in _____ County, _____ State.
Date Filed _____
The Counter- Respondent asked for a protective order against _____.
The cause number of the protective order case is _____.
If the Counter-Respondent gets a protective order, I will file a copy of it before any hearings in this case.

21C. Protective Order in Place

- ☐ I have a protective order. The protective order is against _____.
I got the protective order on _____ in _____ County, _____ State.
Date of Order _____
The cause number for the protective order is _____.

Either I have attached a copy of the protective order to this counter-petition, or I will file a copy of it with the court before any hearings in this case.

☐ A Counter-Respondent in this case has a protective order.

The protective order is against _____.

The protective order was made on _____ in _____ County, _____ State.
Date of Order County

The cause number for the protective order is _____.

Either I have attached a copy of the protective order to this counter-petition, or I will file a copy of it with the court before any hearings in this case.

22. Family Information

[Check only if applicable.]

☐ I believe the child(ren) or I will be harassed, abused, seriously harmed, or injured if I am required to give the Counter-Respondent(s) the information checked below for myself and the child(ren):

[Check the boxes below to tell the judge which information you want to be kept confidential.]

☐ home address, ☐ mailing address, ☐ employer, ☐ work address,
☐ home phone no., ☐ work phone no. ☐ social security no., ☐ driver's license no.,
☐ e-mail address.

I ask the Court to Order that I not have to give this information or notice of changes in this information to the Counter-Respondent(s). I also ask the Court to keep this information confidential.

23. Request for Judgment

I ask that citation and notice be issued as required by law and that the Court make the orders I have asked for in this Counter-Petition and any other orders to which I am entitled. I ask for general relief.

Respectfully,

→

Respondent/Counter-Petitioner's Signature

Date

Respondent/Counter-Petitioner's Printed Name

Phone Number

Mailing Address

City

State

Zip

Email Address: _____ Fax (if available) _____

Warning: Each Respondent will get a copy of this form. If you are concerned about a Respondent learning your address, call the Hope Line at 800-374-4673(HOPE) for free advice before filing this form with the court.

I understand that I must notify the Court and each Counter-Respondent's attorney (or the Counter-Respondent if the Counter-Respondent does not have an attorney) in writing if my mailing address or email address changes during these proceedings. If I don't, any notices about this case will be sent to me at the mailing address or email address on this form.

24. Certificate of Service to the Office of the Attorney General (OAG)

Sign below **only** if your child(ren) receive (or have received) Medicaid or TANF. This tells the judge that you will deliver a copy of this Petition to the Office of the Attorney General Child Support Division as required by law. Get contact information for the Office of the Attorney General Child Support Office in the county where this case will be filed at https://www.texasattorneygeneral.gov/apps/cs_locations/. Bring proof of delivery with you to court.

I certify that a true copy of this Counter-Petition was served on the Office of the Attorney General Child Support Division* in person, by certified and first-class mail, by commercial delivery service, by fax, by email, or through the electronic file manager on this date.

→

Respondent/Counter-Petitioner's Signature

Date

Note: For Information about how to file an answer go to www.TexasLawHelp.org

For a referral to a lawyer call your local lawyer referral service
or the State Bar of Texas Lawyer Referral Information Service at 800-252-9690.

For information about free and low-cost legal help in your county go to
www.TexasLawHelp.org or call the Legal Aid office serving your area:

Legal Aid of Northwest Texas 888-529-5277 (serves Dallas / Fort Worth area & Northwest Texas)

Lone Star Legal Aid 800-733-8394 (serves Houston area & East Texas)

Texas Rio Grande Legal Aid 888-988-9996 (serves Austin / San Antonio area, El Paso area & South Texas)

If you have been the victim of family violence, or if at any time you feel unsafe, get help by calling the:

National Domestic Violence Hotline at 800-799-SAFE (7233) or

Texas Advocacy Project Hope Line at 800-374-HOPE (4673) or

Advocates for Victims of Crime (AVOICE): at 888-343-4414.