

CONFIDENTIAL

State of Minnesota

District Court

County _____

Judicial District: _____
Court File Number: _____
Case Type: _____

- In Re the Marriage of:
- In Re the Custody of:

**Guardian ad Litem
Fee Waiver Application**

Petitioner

and

(Family)

Respondent

1. Have you been granted an In Forma Pauperis in this proceeding?
 No
 Yes (If you have a current IFP Order waiving fees in this proceeding, you may STOP here and go to the last page to sign and date the application.)

2. Are you, or a dependent who lives with you, receiving any form of public assistance?
 No
 Yes (Please provide supporting documentation and check all boxes below that apply):
 - MSA (Minnesota Supplemental Assistance Programs)
 - MFIP (Minnesota Family Investment Program)
 - Supplemental Security Income (SSI)
 - Food Stamps
 - General Assistance
 - MinnesotaCare, Medical Assistance, or General Assistance Medical Assistance
 - Other

If a dependent living with you receives public assistance, how are they related to you?

3. I am represented by a civil legal services program or volunteer attorney program, based on indigency. My attorney's name is _____.

If you have indicated that you are receiving public assistance or legal assistance, you may STOP here and go to the last page to sign and date the application. If not, you MUST fill out the complete application on the following pages.

4. My family size is _____. (Include yourself, your spouse, your minor children, and other dependents in your household.) For my family size, I counted myself and (list all others):

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Real Estate (market value minus unpaid mortgage/loans)
Homestead: \$ _____
Other Real Estate: \$ _____
Other personal property (jewelry, stocks, bonds, etc. - list separately)
_____ \$ _____
_____ \$ _____

14. I am presently \$ _____ in debt, excluding car loans and real estate mortgage/loans.

15. Other factors which support your request are (explain unusual medical expenses, emergencies, reasons that the family money is not available to you, or other circumstances to help the Judge understand your situation): _____

I declare under penalty of perjury that everything I have stated in this document is true and correct. Minn. Stat. § 358.116.

Dated

Signature

County and state where signed

Name: _____
Address: _____
City/State/Zip: _____
Telephone: _____
Email: _____