



6. The name and age of each minor child, including any stepchildren, whose welfare may be affected by the controversy is: (use additional sheets of paper if necessary.)

Name

Age

I, the Petitioner, fully understand that this Petition may not be withdrawn from Conciliation Services until the minimum required conferences have been concluded, or the court ends the proceedings.

Therefore, I request that the parties be ordered to attend Conciliation Services in an effort to effect a reconciliation of the spouses, or an amicable settlement of the controversies involved.

Date:

Petitioner's Signature

**Your attorney's name, address and telephone number:**

Attorney's Name:

Address:

City, State, Zip Code:

Telephone Number:

**Your spouse's attorney's name, address, and telephone number:**

Attorney's Name:

Address:

City, State, Zip Code:

Telephone Number: