



# Juvenile Court ~ Tallapoosa Judicial Circuit

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Judge Crystal H. Bice  
Associate Judge Deana Perry

## **MEMORANDUM CONCERNING LEGITIMATION PACKET**

You have been provided with this legitimation packet because you have expressed a desire to legitimate your biological child. While you are entitled to represent yourself in this matter, **you are STRONGLY encouraged to obtain the assistance of an attorney.** Court procedures are complicated and if this matter is going to be contested by the mother, it is unlikely that an untrained individual can adequately represent himself.

**PLEASE READ THE REQUIRED DOCUMENTS CAREFULLY AND PROVIDE ALL REQUIRED INFORMATION AND RECORDS.**

If you signed certain documents at the hospital at the time the child was born, then you may have administratively legitimated the child, and you may not have to file a Petition for Legitimation with the Court. You should immediately provide copies of any such documents in your possession to the Clerk or the Court at any hearings, so that a determination can be made as to whether you will have to file a Petition for Legitimation.

Court personnel cannot provide such assistance to you in preparing the required paperwork as it would amount to the unauthorized practice of law. **The Court DOES NOT appoint attorneys to represent fathers who are not legal fathers because Georgia law does not provide for such a right. The mother, however, WILL be entitled to a court appointed attorney if she is unable to afford an attorney and financially qualifies for one.**

Please note that the parties to this legitimation action will be required to undergo a paternity test. **The cost of said paternity testing will be assessed against the Petitioner/Biological Father.**

# **INSTRUCTIONS FOR FILING A PETITION FOR LEGITIMATION**

## **GENERAL COMMENTS**

This is a legitimation packet for a biological father of a child born out of wedlock to file on his own. This form packet cannot be used by the mother or any other person other than the biological father.

**Please read these instructions and each form very carefully.** Missing or misreading a word could cause you to make serious errors in your case, placing your rights and the direction of your legitimation case in jeopardy.

## **INTRODUCTION**

In the State of Georgia, one way that a father may establish legal rights to a child born out of wedlock is to file a petition for legitimation in the Juvenile Court if there is currently a deprivation case pending in this Court regarding the child or children you want to legitimize. There are two options available to you for filing a legitimation case: (1) you can hire an attorney who will prepare your paperwork and represent you in court, or (2) you can use the forms included in this packet and represent yourself in court. If the facts in your case and Georgia law establish that your petition should be granted, the Judge will grant your legitimation. After a court grants your legitimation and issues a *Final Order for Legitimation*, you will have legal rights to your child. The Final Order of Legitimation from a Juvenile Court does NOT, however, give you custody rights to your child, but only the right to pursue custody in a separate court case.

It is advisable to speak with an attorney before filing any action with the court. This legitimation is no exception to that rule. There are often more issues involved in a legitimation than you might realize if you fail to get legal advice. However, you may want to review the forms and instructions in this packet before you talk to an attorney, so that you will be able to make the best use of your time with the attorney.

Legitimation can be a very complicated process. If documents are not completed, signed, notarized and filed as required by law, the legitimation pleadings are not in compliance with the law; a judge cannot grant your request for legitimation, and may dismiss your case.

If you want a court to grant your legitimation, **you must follow the law and you must complete each and every paragraph that applies to your case (but not paragraphs that do not apply to your case).**

Please note: O.C.G.A. §15-19-51 prohibits court personnel (including staff attorneys or law clerks, calendar clerks, clerk's office staff, and sheriff's department staff) from giving legal advice or answering legal questions. These instructions and these forms are not intended to be legal advice, do not constitute legal advice and must not be relied upon you as legal advice. They are merely a set of minimal instructions that the court has compiled to explain the minimum efforts needed to be made by any individual who wishes to file a petition for legitimation of a child. Be advised that following these instructions completely and completing the forms correctly does not guarantee that the Judge will decide to grant your petition to legitimize. Each case is decided on its own facts in light of current law.

## **YOU MAY ESPECIALLY NEED AN ATTORNEY IF:**

- The case is contested OR an attorney represents the mother.
- There has been family violence between you, your child, or the mother.
- You are unable to locate the mother to have her served with this action.
- Your child's mother was married at the time your child was conceived or born.
- Another man's name is listed as the father on the child's birth certificate.

***Whether your case is contested or uncontested, you should speak with an attorney before signing a settlement agreement or filing any other documents with the court.***

**COMPLAINT**  
IN THE JUVENILE COURT OF  
POLK COUNTY, GEORGIA

Case # 115-

File # -J-

Child's Name (last, F, M) \_\_\_\_\_ Age: \_\_\_\_\_

AKA: \_\_\_\_\_ DOB: \_\_\_\_\_

Race: \_\_\_\_\_ Lives \_\_\_\_\_ Telephone: Cell: \_\_\_\_\_

Sex: \_\_\_\_\_ With: \_\_\_\_\_ Telephone: Bus.: \_\_\_\_\_

Child's Address \_\_\_\_\_  
(Street) (Apt#) (City) (County) (State) (Zip)

Mother's Telephone: Cell: \_\_\_\_\_

Name: \_\_\_\_\_ Telephone: Bus.: \_\_\_\_\_  
(include Mother's Maiden Name in Parenthesis)

Mother's Address \_\_\_\_\_  
(Street) (Apt#) (City) (County) (State) (Zip)

Father's Full Name: \_\_\_\_\_ Father's DOB: \_\_\_\_\_ Telephone: Cell: \_\_\_\_\_  
Telephone: Bus.: \_\_\_\_\_

Father's Address \_\_\_\_\_  
(Street) (Apt#) (City) (County) (State) (Zip)

Legal Custodian Telephone: Cell: \_\_\_\_\_  
Telephone: Bus.: \_\_\_\_\_

Custodian's Address \_\_\_\_\_  
(Street) (Apt#) (City) (County) (State) (Zip)

Complaint: PETITION FOR LEGITIMATION O.C.G.A. §19-7-22  
(Code Section)

Taken Into Custody Yes ( ) No ( )  
By Whom: \_\_\_\_\_ (Name) \_\_\_\_\_ (Agency)

Placement of Dependent Child \_\_\_\_\_ Date: \_\_\_\_\_  
Time: \_\_\_\_\_

Person Notified \_\_\_\_\_ Date: (Leave Blank)  
By: (Leave Blank) \_\_\_\_\_ Via: \_\_\_\_\_ Time: (Leave Blank)

Detained: (Leave Blank) Yes ( ) No ( ) Place \_\_\_\_\_ Date: (Leave Blank)  
Authorized by: (Leave Blank) Detained (Leave Blank) \_\_\_\_\_ Time: (Leave Blank)

Released To: \_\_\_\_\_ Date: (Leave Blank)  
Relation: (Leave Blank) \_\_\_\_\_ Time: (Leave Blank)

Co-Perpetrators: (Leave Blank) \_\_\_\_\_  
(Name and Age)

Co-Perpetrators: (Leave Blank) \_\_\_\_\_  
(Name and Age)

Victim's Name: (Leave Blank) \_\_\_\_\_ Phone # (Leave Blank)  
Victim's Address: (Leave Blank) \_\_\_\_\_

Victim's Name: (Leave Blank) \_\_\_\_\_ Phone # (Leave Blank)  
Victim's Address: (Leave Blank) \_\_\_\_\_

**Name of Child** \_\_\_\_\_

*Give Complete Details of Offense(s) or Complaint(s) and Apprehension:*

**[SEE PETITION FOR LEGITIMATION]**

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<b>Investigating Officer:</b> _____	<b>Agency:</b> <b>P.D. Report #</b> _____	<b>Phone #</b> _____
<b>Complainant's Name:</b> _____	<b>Complainant's Address:</b> _____	_____
<b>Signature(s):</b> _____	<b>Email:</b> _____	_____
<b>Date</b> _____	<b>Phone:</b> _____	_____

**IN THE JUVENILE COURT OF POLK COUNTY  
STATE OF GEORGIA**

IN THE INTEREST OF:

_____	)	
A Minor Child.	)	FILE NO.: _____ -J- _____
	)	CASE NO.: <u>115-</u> _____
	)	
_____	)	FILE NO.: _____ -J- _____
A Minor Child.	)	CASE NO.: <u>115-</u> _____
	)	
_____	)	FILE NO.: _____ -J- _____
A Minor Child.	)	CASE NO.: <u>115-</u> _____

**PETITION FOR LEGITIMATION**

My name is \_\_\_\_\_ and I am representing myself in this legitimation petition. In support of my case, I state as follows:

1. The mother of the above-named child(ren) is: \_\_\_\_\_.
2. The mother shall be served as provided under O.C.G.A. §9-11-4, in the following manner:
  - \_\_\_\_\_ (a) The mother may be served by the Sheriff’s Department at her home address which is: \_\_\_\_\_
  - \_\_\_\_\_ (b) The mother has acknowledged service of process. I have attached a copy of the *Acknowledgement of Service* along with this petition.
3. The child(ren) is/are currently in the temporary legal custody of the Polk County Department of Family and Children Services. The Director at Polk County Department of Family and Children Services can be served by the Sheriff’s Department at 100 County Loop Road, Cedartown, Georgia 30125.
4. I am the biological father of the minor child(ren) listed below:

<u>Name of Child</u>	<u>Sex</u>	<u>Date of Birth</u>	<u>State and County of Birth</u>

5. The minor child(ren) was/were born out of wedlock.
6. A dependency case concerning this/these child(ren) is pending in this Court and was filed on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.
7. During the past five years, the child(ren) has/have lived with the following adults:

<u>Name of Person</u>	<u>Person’s Current Address</u>

8. \_\_\_\_\_ (a) I have never participated as a party or a witness or in any other capacity in any other litigation concerning the custody of or visitation with the minor child(ren) in this or any other state.
- \_\_\_\_\_ (b) I have participated in other litigation concerning the custody of the minor child(ren) in Georgia or another state. The Court, case number and date of any Order concerning custody or visitation under the other litigation are as follows: \_\_\_\_\_
- \_\_\_\_\_
9. \_\_\_\_\_ (a) I do not have any information of any proceeding that could affect this case, including proceedings for enforcement and proceedings relating to family violence, protective orders, termination of parental rights and adoption in this or any other state.
- \_\_\_\_\_ (b) I have information about a proceeding that could affect this case, including proceedings for enforcement and proceedings relating to family violence, protective orders, termination of parental rights or adoptions in this or another state. The Court, the case number and the nature of the proceeding are as follows: \_\_\_\_\_
- \_\_\_\_\_
10. \_\_\_\_\_ (a) I do not know of any person who is not a party to this case, who has physical custody of the child(ren) or who claims to have custody or visitation rights with respect to the child(ren).
- \_\_\_\_\_ (b) I know of someone who is not a party to this case, who has physical custody of the child(ren) or who claims to have custody or visitation rights with respect to the child(ren). The names and present addresses of the person(s) are: \_\_\_\_\_
- \_\_\_\_\_
11. I want to legitimate my relationship with the child(ren).
12. \_\_\_\_\_ (a) I do not want to change the name of the child(ren).
- \_\_\_\_\_ (b) I want to change the name of the child(ren) from:
- \_\_\_\_\_ to \_\_\_\_\_
- \_\_\_\_\_ to \_\_\_\_\_
- \_\_\_\_\_ to \_\_\_\_\_
13. \_\_\_\_\_ (a) I do not want to have my name entered as the father on the birth certificate of each child.
- \_\_\_\_\_ (b) I do want to have my name entered as the father on the birth certificate of each child.
14. Child Support: *[Check only one of the below options]*
- \_\_\_\_\_ (a) The mother has income or is capable of earning sufficient money to support the minor child(ren).
- \_\_\_\_\_ (b) I have income or I am capable of earning sufficient money to support the minor child(ren).
- \_\_\_\_\_ (c) I am not asking the Court to address this issue in this case.
- \_\_\_\_\_ (d) The issue of child support cannot be decided in this action because the Court does not have personal jurisdiction over the mother.

FOR THESE REASONS, I REQUEST THE FOLLOWING RELIEF:

(Check all that apply.)

- \_\_\_\_\_ (a) That the Court enter an Order legitimating my relationship with the child(ren) so that the child(ren) and I will be capable of inheriting from each other in the same manner as if the child(ren) had been born in wedlock;
- \_\_\_\_\_ (b) That the name(s) of the child(ren) be changed to \_\_\_\_\_;  
\_\_\_\_\_;
- \_\_\_\_\_ (c) That the Department of Vital Statistics be ordered and directed to amend the birth records of each child and reissue a birth certificate showing me as the father and changing each child's name as requested above;
- \_\_\_\_\_ (d) That child support for the support of the child(ren) be ordered according to Paragraph 14;
- \_\_\_\_\_ (e) That the mother be served with notice of this petition as provided by law;
- \_\_\_\_\_ (f) That the Polk County Department of Family and Children Services be served with notice of this petition as provided by law;
- \_\_\_\_\_ (g) That a Rule Nisi be scheduled by the Court to decide on the relief I have requested; and,
- \_\_\_\_\_ (h) That the Court order any and all other relief that the Court finds appropriate.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Petitioner, Pro Se [*Signature*]

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

The above Petition is approved to be filed in the best interest of the public and the above-named child(ren).

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Court Designee

**IN THE JUVENILE COURT OF POLK COUNTY  
STATE OF GEORGIA**

IN THE INTEREST OF:

_____	)	
A Minor Child.	)	FILE NO.: _____ -J- _____
	)	CASE NO.: <u>115</u> - _____
	)	
_____	)	FILE NO.: _____ -J- _____
A Minor Child.	)	CASE NO.: <u>115</u> - _____
	)	
_____	)	FILE NO.: _____ -J- _____
A Minor Child.	)	CASE NO.: <u>115</u> - _____

**VERIFICATION**

I, \_\_\_\_\_, personally appeared before the undersigned Notary Public, and say under oath that I am the Petitioner in the above-styled action and that the facts stated in the Petition for Legitimation are true and correct to the best of my knowledge.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
(Sign your name here in the presence of a Notary)  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_

Sworn to and subscribed before me this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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

**IN THE JUVENILE COURT OF POLK COUNTY  
STATE OF GEORGIA**

IN THE INTEREST OF:

_____	)	
A Minor Child.	)	FILE NO.: _____ -J- _____
	)	CASE NO.: <u>115</u> - _____
	)	
_____	)	FILE NO.: _____ -J- _____
A Minor Child.	)	CASE NO.: <u>115</u> - _____
	)	
_____	)	FILE NO.: _____ -J- _____
A Minor Child.	)	CASE NO.: <u>115</u> - _____

**CONSENT TO LEGITIMATION**

1.

I am the ( ) mother, ( ) legal guardian, ( ) legal custodian of the following minor child(ren), who is/are the subject of this legitimation action filed by the Petitioner.

<u>Name of Child</u>	<u>Male/Female</u>	<u>Date of Birth</u>

2.

I hereby give my consent to the following provisions by writing my initials next to them. I do not agree to any of the provisions unless I have written my initials next to them. Further, I have drawn a line through the provisions that I do not agree to.

- \_\_\_\_\_ (a) I consent to the Petitioner legitimating our child(ren) whose name(s) are listed in Paragraph 1 above.
- \_\_\_\_\_ (b) I consent to the child(ren)'s last name(s) being changed to: \_\_\_\_\_.
- \_\_\_\_\_ (c) On the issue of child support:
- \_\_\_\_\_ (1) Child support has already been decided for the child(ren) by a court or agency in another case.
- \_\_\_\_\_ (2) I want the Court to decide child support and enter a child support order as part of this legitimation case.

- \_\_\_\_\_ (3) The Petitioner and I have reached an agreement on child support for the child(ren), and it is consistent with the Georgia child support guidelines. The completed Child Support Worksheet is attached. I understand that it will be included in the Final Order in this case.
- \_\_\_\_\_ (4) The parties live together with the child(ren), so no child support order is necessary.

3.

**I have read this consent document and understand it. I am giving my consent freely. I have written my initials next to all of the provisions in Paragraph 2 to which I am agreeing. I am not being forced to sign this consent, and I believe this legitimation is in the best interest of my child(ren).**

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
*(Signature)*

Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_  
 Phone: \_\_\_\_\_

Sworn to and subscribed before me this  
 \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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

**IN THE JUVENILE COURT OF POLK COUNTY**

**STATE OF GEORGIA**

IN THE INTEREST OF:

_____ )	FILE NO.: _____ -J-
A Minor Child. )	CASE NO.: <u>115-</u> _____
_____ )	FILE NO.: _____ -J-
A Minor Child. )	CASE NO.: <u>115-</u> _____
_____ )	FILE NO.: _____ -J-
A Minor Child. )	CASE NO.: <u>115-</u> _____

**ACKNOWLEDGMENT OF SERVICE**

The undersigned Respondent/Mother hereby acknowledges service of the Summons and Petition for Legitimation in the above-styled case and states that she has received copies of said Summons and Petition and hereby waives any and all further notice, service and issuance of process.

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Respondent/Mother *[Sign your name in presence of a Notary]*  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_

Sworn to and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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

**SUMMONS AND PROCESS**

**IN THE JUVENILE COURT OF POLK COUNTY  
STATE OF GEORGIA**

To: Susan Ollis, c/o Polk Co. DFCS and \_\_\_\_\_  
(DFCS) (Mother's Name)

100 County Loop Road \_\_\_\_\_  
(Address) (Address)

Cedartown, Georgia 30125 \_\_\_\_\_  
(City, State, Zip) (City, State, Zip)

In the Interest of:

Child(ren)'s Name DOB

	FILE #	-J-	CASE # 115-
	FILE #	-J-	CASE # 115-
	FILE #	-J-	CASE # 115-

Child(ren) under the age of 18.

A Petition for Legitimation has been filed in this Court concerning the above child(ren). A copy of that Petition is attached to this summons.

This is a summons requiring you to be in Court. If you fail to come to Court as required, you may be held in Contempt of Court and punished accordingly.

Now therefore, you, the parties named above, are commanded to be and appear on the date and time stated below, and to remain in attendance from hour to hour, day to day, month to month, year to year, and time to time, as said case may be continued, and until discharged by the Court, and you are commanded to lay any and all business aside and to be and appear before the Juvenile Court of Polk County, Georgia, located at the Polk County Courthouse, 102 Prior Street, Courthouse #2, Cedartown, Georgia 30125 on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_ at \_\_\_\_\_ a.m./p.m., and you the said parent, guardian or legal custodian are likewise hereby commanded to be and appear with the aforesaid child in said Court at the time and place above stated, each of you then and there to make defense thereto and to show cause why the said child and all parties named herein should not be dealt with according to the provisions of the law.

WITNESS the Honorable Crystal H. Bice, Judge of said Court, this the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Clerk, Juvenile Court of Polk County

**SUBPOENA TO PRODUCE DOCUMENTS OR OTHER EVIDENCE**

**IN THE JUVENILE COURT OF POLK COUNTY  
STATE OF GEORGIA**

IN THE INTEREST OF:

\_\_\_\_\_ **SEX:** \_\_\_\_\_ **DOB:** \_\_\_\_\_ **FILE #** -J- **CASE #** 115-  
Child Under 18 Years of Age

Name of Mother of Child: \_\_\_\_\_

Hospital of Child's Birth: \_\_\_\_\_

**TO: DONNA MOORE, State Registrar**

**ADDRESS: Office of Vital Records, c/o BRIDGET SCOTT or GWENDOLYN DUFFIN  
GA Department of Public Health  
1680 Phoenix Boulevard, Suite 100  
Atlanta, Georgia 30349  
Office: (770) 909-2749, Fax: (770) 909-2722**

YOU ARE HEREBY COMMANDED to supply to the **Polk County Juvenile Court, Tallapoosa Judicial Circuit, 102 Prior Street, Suite 202, Cedartown, Georgia 30125** on or before \_\_\_\_\_, copies of all documents pertaining to the birth record of the above named child including any paternity acknowledgment, any acknowledgment of legitimation or any other record or document used to generate a birth certificate or which is a record of paternity or legitimation of the above named child. Said copies may be provided by fax unless further subpoena indicates certified copies are necessary. The Court's fax number is (770) 749-2190.

WITNESS, the Honorable Crystal H. Bice, Judge of said Court, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Polk County Juvenile Court

**PROOF OF SERVICE**

Pursuant to the agreement between the Council of Juvenile Court Judges and the Office of Vital Records, this document was served by e-mail it to Vital Records at: Bridget.Scott@dph.ga.gov on the following date at the following time: \_\_\_\_\_

\_\_\_\_\_  
Deputy Clerk/Clerk