DISSOLUTION AGREEMENT

JD-FM-172 Rev. 5-16
C.G.S. § 46b-51

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.ct.gov

Court Use Only
AGREMNT

Instructions: *The instructions for filling out this form are on form JD-FM-172A.*

Judicial District of	At *(Town)*	Docket number

Plaintiff's name *(Last, first middle initial)*	Defendant's name *(Last, first, middle initial)*

The plaintiff and defendant agree that:

1. Our *("X" one)* ☐ marriage ☐ civil union has broken down irretrievably.

2. The custody of the child(ren) shall be as follows:

☐ Joint legal custody to _____ and _____

Primary residence with: _____

A parenting responsibility plan in the best interest(s) of the minor child(ren)

☐ shall be incorporated by reference or

☐ as follows: _____

☐ Sole custody to: _____

3. As to visitation with the child(ren):

_____

Who will pick up/drop off for visits or parenting time transition: _____

Holiday and school vacation schedule: _____

The amounts/percentages indicated below for **Child Support, Health Care Insurance Coverage and Unreimbursed Health Care Costs,** and **Child Care Costs** *must follow the Child Support and Arrearage Guidelines (the Guidelines), which are available at Clerk's Offices and on the Judicial Branch website at* www.jud.ct.gov/publications, *unless you ask for one of the deviation criteria to apply (reasons for an amount different than the Guidelines).*

4. As to current and/or past due **Child Support**:

_____

☐ This amount follows the Guidelines.

☐ This amount is different from the Guidelines (deviation). Give reason for deviation from the Guidelines *(see Guidelines for reason that applies)*:

_____

5. As to the child's or children's required **Health Care Insurance Coverage and Unreimbursed Health Care Costs:**

_____

☐ This amount follows the Guidelines.

☐ This amount is different from the Guidelines (deviation). Give reason for deviation from the Guidelines *(see Guidelines for reason that applies)*:

_____

6. As to **Child Care Costs** that qualify under the Guidelines:

_____

☐ This amount follows the Guidelines.

☐ This amount is different from the Guidelines (deviation). Give reason for deviation from the Guidelines *(see Guidelines for reason that applies)*:

_____

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7. As to post-majority educational support *("x" one):*

- ☐ Both of the parties have made a knowing and intelligent waiver of their right to request a post-majority educational support order; or
- ☐ The parties ask the Court to reserve jurisdiction to determine whether a post-majority educational support order should issue and the terms of the order; or
- ☐ The parties ask the Court to find that it is more likely than not that the parents would have provided post-majority educational support, and for the Court to reserve jurisdiction to determine whether to enter an educational support order and the terms of the order; or
- ☐ The parties ask the Court to enter a post-majority education support as follows *(Attach additional sheets if necessary):*

8. As to alimony:

9. As to income withholding, we understand that the support orders are by immediate income withholding unless for cause or we both agree to it being contingent: We agree to a*(n)*

☐ Immediate ☐ Contingent income withholding.

10. As to division of property:

As to real property

As to personal property

As to pensions and retirement accounts

11. As to division of debts:

12. As to the change of name:

☐ Plaintiff's name is restored to the ☐ birthname of _____

or ☐ former name of _____ .

☐ Defendant's name is restored to the ☐ birthname of _____

or ☐ former name of _____ .

13. Other:

We certify that the above statements are our agreement.

Plaintiff *(Print name)*	Plaintiff's signature	Date signed
Defendant *(Print name)*	Defendant's signature	Date signed

ADA NOTICE

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at *www.jud.ct.gov/ADA*.

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