Request for paternity testing

Date of request:

Requestor information

Lawyer information

Name:

Solicitor #:

Phone:

Email:

Client information

Name:

Certificate #:

Issuing area office:

Client is the: Respondent   Applicant

Client's date of birth:

Occupation:

Employer/source of income:

Income: Gross: Net:

Child information

Chid(ren)'s name(s) and date(s) of birth:

Opposite party's information

Name:

Contact: Address: Unit #:

                     Town/City: Province: Postal code:

Date of birth:

Occupation:

Employer/source of income:

Income: Gross: Net:

Solicitor:

Certificate #:

Client's claim

Claim:

Access		Determination of paternity
Custody		Support - child
Custody and access		Support - spouse
Other (If other, please specify)		

Comments about the claim

Counter claim:

Access		Determination of paternity
Custody		Support - child
Custody and access		Support - spouse
Other (If other, please specify)		

Comments about the counter claim

Reason paternity is in issue

Applicant unsure of paternity	Respondent unsure of paternity
Applicant denying paternity	Respondent denying paternity

Anticipated outcome

Finding of:	Paternity	Non paternity		
Custody	Sole	Joint		
Access:	None	Supervised	Limited	Defined	Generous
Child support:	Vary	Eliminate	Expunge / reduce arrears	
Spousal support:	Vary	Eliminate	Expunge / reduce arrears	

Details

Nature of relationship between mother and putative father:

Status:	Married	Cohabitating	No formal relationship	Casual

Dates: From: To:

Comments:

Nature of relationship between child and putative father:

Summary of prior legal proceedings and if existing court order(s) exist, provide reasons for questioning patenity now:

Reasons for believing/doubting paternity and proof other than blood tests:

Other pertinent information (eg.: prior agreements/arrangements concerning custoy, access of support):

For more information on the general policies regarding translation see the Legal Aid Ontario Disbursements handbook.

For assistance in completing this form please contact the Lawyer Service Centre via 1-886-979-9934 (toll free).

I certify that the information included in this form is complete, true, and accurate.

Name: Date:

Please submit the completed form through *Legal Aid Online* using electronic document submission or LAOifax process.

LEGAL AID ONTARIO
AIDE JURIDIQUE ONTARIO