

REQUEST FOR TERMINATION OF A CHILD SUPPORT ORDER

SETS Case Number: _____

Order Number: _____

Your Name: _____

Social Security Number: _____ Phone #: _____

Address: _____

Other Party's Name: _____

REASON FOR TERMINATION:

Child's Name: _____ Date of Birth: _____

Graduation from High School

Graduation Date: _____ School: _____

My Child is 18 or Older and No Longer Attends High School

Withdrawal Date: _____ School: _____

My Child is 19 Years Old

Marriage of Parties

Date Parties Married: _____

My Child Has Joined the Armed Forces

Date Joined: _____

My Child Is Now Marries

Date of Marriage: _____

Legal Change of Custody

Date of Legal Custody Change: _____

Other reason the support order should be terminated: _____

Please Sign and Date