

CSE 101
 Rev. 07/14
 11/12 Issue Obsolete
 Rec. Ret = Active +4CY

State of Louisiana
Department of Children and Family Services
Child Support Enforcement

**APPLICATION OR
 DOCUMENTATION FOR
 CHILD SUPPORT SERVICES**



LOCAL OFFICE BLOCK	
LASES NO.	_____
Date:	_____
Appl Requested	_____
Appl/Flyer 1 Provided	_____
Appl/Rec/Fee Paid	_____
Full Service - \$25	_____
Parent Locate Only	_____
SSN - \$10 / No SSN - \$14	_____
Adding a Child	<input type="checkbox"/>

What services are you applying for? Child and Medical Support Medical Support Locate

Note: The State will pursue child and medical support for Medicaid recipients unless the applicant indicates that child support services are not wanted. Once an order is established for Medicaid recipients, the choice of service provided no longer exists. Child Support Enforcement will continue to provide support services as long as Medicaid benefits are being provided.

SECTION A. APPLICANT INFORMATION

Name-First, Middle, Last, Suffix _____

Maiden Name _____ Other Names Used _____

Date of Birth _____ Social Security Number _____ Race _____ Sex _____

Street Address _____ Mailing Address _____ Home Phone Number (____) _____

City, State, & Zip _____ City, State, & Zip _____ Cell Phone Number (____) _____

Parish/County of Residence _____ Email address _____ Work Phone Number (____) _____

Do you or any of the children listed receive: MEDICAID FITAP KINSHIP CARE?

Your relationship to child(ren): Mother Father Other (specify) _____

Does the child(ren) live with you? Yes No If no, where is the child(ren) living and with whom:

Name of Custodial Party: _____ Street Address: _____

City/State/Zip: _____ Home Phone Number: (____) _____

Cell Phone Number: (____) _____ Email Address: _____

Race: _____ Sex: _____ DOB: _____ SSN: _____

IS THERE FAMILY VIOLENCE WITH ANYONE APPEARING ON THE APPLICATION? YES NO

NONDISCLOSURE OF INFORMATION: When the Department has reasonable evidence of family violence, either domestic violence or child abuse, the case record will include an indicator of family violence for any person who is a party to the case. The indicator will prohibit release of information except to a court or agent of a court that has authority to issue an order for support or to make or enforce custody or visitation determination.

SECTION B. MOTHER OF CHILD(REN) INFORMATION:

Name-First, Middle, Last, Suffix _____		Maiden Name _____	Other Names Used _____
Date of Birth _____	Place of Birth (City, State) _____		Social Security Number _____
Street Address _____		City, State, Zip _____	() _____ Home Phone Number
Mailing Address _____		City, State, Zip _____	() _____ Cell Phone Number
Email address: _____			() _____ Work Phone Number

Is the address listed above a current address? Yes No Unknown

SECTION C. FATHER OF CHILD(REN) INFORMATION:

Name-First, Middle, Last, Suffix _____		Other Names Used _____
Date of Birth _____	Place of Birth (City, State) _____	
Street Address _____		City, State, Zip _____
Mailing Address _____		City, State, Zip _____
Email address: _____		

Is the address listed above a current address? Yes No Unknown

SECTION D.- CHILD 1 INFORMATION

Name-First, Middle, Last, Suffix _____		Date of Birth _____	Place of Birth (City & State) _____
Social Security Number _____	Race/Sex _____		
Current State of Residence _____	State of Residence Last Six Months _____		

Were the father and mother of this child legally married to each other? Yes No Unknown

Date of marriage MM DD YY City: _____ State: _____

Date of divorce MM DD YY City: _____ State: _____ Parish/County _____

Is the father's name on the Birth Certificate? Yes No Unknown If yes, provide a copy.
 If no, has the biological father signed an Acknowledgment of Paternity? Yes No Unknown
 If yes, provide a copy.

Is there a court order establishing paternity? Yes No Unknown If yes, provide a copy.
 If yes, what state and parish/county established the order? State _____ Parish/County _____

Is there a court order for child and/or medical support for the child? Yes No Unknown If yes, provide a copy.
 If yes, what state and parish/county established the order? State _____ Parish/County _____
 If yes, is past due support owed? Yes No

Is there a custody order? Yes No Unknown If yes, provide a copy.

**NOTICE TO CUSTODIAL PARENTS, NON-CUSTODIAL PARENTS AND PAYORS
OF SUPPORT CONCERNING SUPPORT ENFORCEMENT SERVICES**

The following support enforcement services (through the Louisiana Department of Social Services) are authorized and mandated by statute in Louisiana under the provisions of LSA - R.S. 46:236.1.2 (A):

- (1) Enforce, collect, and distribute the support obligation owed by any person to his child or children and to his spouse or former spouse with whom the child is living if a support obligation has been established with respect to such spouse or former spouse.
- (2) Locate absent parents.
- (3) Establish paternity.
- (4) Obtain and modify family and child support orders.
- (5) Obtain and modify medical support orders.

The District Attorney contracts with the Department of Social Services to perform some or all of the services which are mandated of the Department. The District Attorney only represents the State of Louisiana, Department of Social Services in proceedings brought by it in the above matters. This sole representation is re-iterated in LSA - R.S. 46:236.1.7 (B), which states:

B. Any attorney initiating legal proceedings pursuant to this Subpart and Titles IV-D and IV-A of the Social Security Act shall represent the state of Louisiana, Department of Social Services exclusively. An attorney-client relationship shall not exist between the attorney and any applicant or recipient of child support enforcement services for and on behalf of a child or children, without regard to the name in which legal proceedings are initiated. In those cases in which the Department of Social Services is providing child support services, the attorney representing the department shall not represent any party in matters involving custody or visitation. The provisions of this Paragraph shall apply to a staff attorney in support enforcement services, district attorney, or contract attorney providing support services pursuant to Title IV-D.

Therefore, when applying for services, custodial parents, non-custodial parents and payors of child support need to be aware that the District Attorney and his staff do not represent the custodial parent, the non-custodial parent or any individual associated with the case. The District Attorney represents only the Department of Social Services and the State of Louisiana, acting in the best interest of the child or children for whom paternity and/or support are being pursued.

Further, attached is a copy of Act 801 (LSA - R.S. 14:75) which provides for a possible criminal prosecution for the failure to make child support payments. Should a party decide to pursue criminal charges, they will be referred to the appropriate law enforcement authority for complaint and investigation. Such complaints can not be made through the District Attorney's Office of Child Support.

I have been supplied a copy of LSA - R.S. 14:75 (Failure to Pay Child Support Obligation) which is attached to this document, and I have read and understand that the District Attorney and his staff do not represent the custodial parent, the non-custodial parent or any individual associated with the case; and that should a party wish to pursue criminal charges, that party will be referred directly to the appropriate law enforcement authority for complaint and investigation.

CUSTODIAL PARENT - RECIPIENT

DATE

WITNESS

NON-CUSTODIAL PARENT - PAYOR

DATE

WITNESS

PLEASE SUPPLY THE FOLLOWING
DOCUMENTS for COPYING:

- ✓ MEDICAID CARD FOR CHILD(REN) **OR** \$25.00 APPLICATION FEE (cash or money order)
- ✓ MEDICAL CARDS (OTHER) *ex; BlueCross, etc.*
- ✓ BIRTH CERTIFICATE (***Full Sheet Only!***) Issued by State Footprints and Birth cards **NOT** accepted
- ✓ SOCIAL SECURITY CARDS FOR YOU & CHILD(REN)
- ✓ YOUR CURRENT PICTURE ID
- ✓ YOUR LAST TWO PAYCHECK STUBS
- ✓ CHILDCARE STATEMENT (if applies)
- ✓ CIVIL ORDERS (***Signed by Judge Only***) including any of the following:
 - 1) Child Support
 - 2) Custody
 - 3) Paternity
 - 4) Divorce (include Marriage Certificate)