



Michelle Thomas & Associates
ATTORNEYS-AT-LAW

MICHELLE A. THOMAS, C.LE., LL.B (Hons)

Shop 26E, 45 Elma Crescent
Boulevard Supercentre
Kingston 20

Tell: (876) 620-9717
Cell: (876) 446-4443
Fax: (876) 620-9686

Email: michellethomaslawoffice@gmail.com

Applicant Information.

Name: _____

Address: _____

Telephone: Area code _____ digits _____ or _____

TRN: _____ NIS: _____

D.O.B: _____

Place / Hospital of Birth: _____

Email: _____

Occupation: _____

Next of kin

Name: _____

Address: _____

Telephone: Area code (_____) cell: _____ or _____

Email: _____

MATRIMONIAL PROCEEDINGS

Respondent Information (The person with who you are divorcing)

Name: _____

Current Address: _____



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Telephone: Area Code (_____) cell: _____ or _____

Email: _____

Occupation: _____

Date of Marriage: _____

D.O.B: _____

Place/ Hospital of Birth: _____

Place of Marriage: _____

Date of Separation: _____

Marital Home Address: _____

Reason for separation: _____

This section is to be completed if the parties have Child/Children;

Number of Child/ Children: _____

Name of all Child/Children: _____

D.O.B of all Child/Children: _____



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School Child/Children attend: _____

Child/Children place of worship & denomination: _____

Are you seeking maintenance for Child / Children: YES / NO

With whom does the Child / Children reside: _____

How many bedrooms and bathrooms where the child resides: _____

What is your gross salary and how much is spent on maintaining the Child/ Children: _____

What is the gross salary of the Respondent and how much does he / she spend in maintaining the Child/

Children: _____

Do you want full custody or joint: _____

Does the Child/ Children have any disabilities: _____

If so please state disability: _____