
Name

Address

City, State, Zip

Phone

Check your email. You will receive information and documents at this email address.

Email

I am Petitioner Respondent
 Petitioner's Attorney Respondent's Attorney (Utah Bar #: _____)
 Petitioner's Licensed Paralegal Practitioner
 Respondent's Licensed Paralegal Practitioner (Utah Bar #: _____)

In the District Court of Utah

_____ Judicial District _____ County

Court Address _____

<p>_____ Petitioner</p> <p>v.</p> <p>_____ Respondent</p>	<p>Notice of Education Requirements (Utah Code 30-3-11.3 and 30-3-11.4, and Code of Judicial Administration Rule 4-907)</p> <p>_____ Case Number</p> <p>_____ Judge</p> <p>_____ Commissioner</p>
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To:

Respondent's Name

You are required to attend the following course(s):

- an orientation course (parents of minor children; divorce or temporary separation)
- an education course (parents of minor children; divorce only)

Divorce cases

(Utah Code 30-3-11.3 and 30-3-11.4)

- Petitioner must attend the orientation and education courses within 60 days after filing the Petition for Divorce.
- Respondent must attend the orientation and education courses within 30 days after receiving this notice.

Temporary separation cases

(Utah Code 30-3-4.5 and 30-3-11.4)

- Petitioner must attend the orientation course within 60 days after filing the Petition for Temporary Separation.
- Respondent must attend the orientation course within 45 days after receiving this notice.

Course information

Course information is available on the court's website: www.utcourts.gov/specproj/dived/, or call 801-238-7181 (en español 801-238-7180).

Plaintiff/Petitioner or Defendant/Respondent

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at _____ (city, and state or country).

 Date

Signature ► _____
 Printed Name _____

Attorney or Licensed Paralegal Practitioner of record (if applicable)

 Date

Signature ► _____
 Printed Name _____

Certificate of Service

I certify that I filed with the court and am serving a copy of this Notice of Education Requirements on the following people.

Person's Name	Service Method	Service Address	Service Date
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

 Date

Signature ► _____
 Printed Name _____