

**Notice to Court Clerk**  
If this application is filed with the court, send the application along with a copy of the child support order to CSED.

**APPLICATION FOR CHILD SUPPORT ENFORCEMENT DIVISION (CSED) SERVICES**

Court Case No. \_\_\_\_\_

I am voluntarily applying for the services of the Child Support Enforcement Division (CSED). I understand that CSED will take all actions necessary to enforce the child support order for the children named below. I agree that CSED can enforce the medical support order. I understand that I must provide all the information that CSED needs to enforce the support order.

**My Full Name:** \_\_\_\_\_ Birthdate: \_\_\_\_\_

Previous Names Used: \_\_\_\_\_

**My Contact Information:**

Mailing Address (include city/state/ZIP): \_\_\_\_\_

Phone: \_\_\_\_\_  cell  work  other Phone: \_\_\_\_\_  cell  work  other

Email: \_\_\_\_\_

Employer Information: \_\_\_\_\_

**Other Parent's Name:** \_\_\_\_\_ Birthdate: \_\_\_\_\_

Previous Names Used: \_\_\_\_\_

**Other Parent's Contact Information:**

Mailing Address (include city/state/ZIP): \_\_\_\_\_

Phone: \_\_\_\_\_  cell  work  other Phone: \_\_\_\_\_  cell  work  other

Email: \_\_\_\_\_

Employer Information: \_\_\_\_\_

.....  
I am the children's  Parent.  Legal Guardian.  Non-Parent Custodian.

<u>Child's Name</u>	<u>Birthdate</u>	<u>Child's Name</u>	<u>Birthdate</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

A child support order is currently in effect:  
Date of order: \_\_\_\_\_ Court case number: \_\_\_\_\_  
Court location (city and state): \_\_\_\_\_  
Parents' names on order: \_\_\_\_\_  
Date of marriage (if applicable): \_\_\_\_\_

\_\_\_\_\_ Date

\_\_\_\_\_ Applicant's Signature

AS 25.27.265(b) requires parties in child support proceedings to give CSED their social security numbers and other specified information. Your social security number may be used to make sure that you follow the child support order. **You must provide your social security number on form [DR-314, Information Sheet](#). This form will be kept confidential.**

**Visit CSED's website at [www.childsupport.alaska.gov](http://www.childsupport.alaska.gov) for more information.**