

# REQUEST FOR CHILD SUPPORT SERVICES



**Arkansas Office of  
Child Support Enforcement**



## **CHILD SUPPORT SERVICES**

The Arkansas Office of Child Support Enforcement (OCSE) is a division within the Department of Finance and Administration. OCSE works in partnership with the Federal Office of Child Support Enforcement and other state agencies.

The primary goal of OCSE is to work with custodial parties to help establish and receive court-ordered financial and medical support.

We provide full services to parents and guardians who have an open enforcement case with us. For more information about the OCSE program, go to our website at [www.childsupport.arkansas.gov](http://www.childsupport.arkansas.gov) or contact your local child support office.

This booklet is for custodial parties to enroll for an open enforcement case.

## **DOMESTIC VIOLENCE**

If you have experienced domestic violence with the other parent, please indicate as such in the enclosed Questionnaire. You may be asked to provide copies of any orders of protection or other information about the situation. OCSE will provide extra protection to information about your whereabouts. You can update information about safety at any time during the life of your case.

## **AVAILABLE SERVICES**

Services are available to you if...

- You are the parent, legal guardian, or caretaker of a child under 18 years of age who lives with you.
- Unpaid child support is owed to you, the child is over the age of 18, and the amount to be recovered is based on a court order. If the child is over age 23 and a judgment has not been entered setting out the total amount of unpaid support owed, enforcement may be limited based on the circumstances of the case.

If you are currently receiving Medicaid (including Arkansas Works) for yourself or if

a child for whom you are seeking services is receiving ARKids 1st A or B, fees will not be charged for services.

NOTE: If you currently receive Transitional Employment Assistance (TEA, including Arkansas Work Pays), Supplemental Nutrition Assistance Program (SNAP), or if both you and your child receive Medicaid, there is a different booklet and form for you to complete. Please ask your local child support office for the appropriate form.

## **SERVICES PROVIDED**

OCSE will provide the following services:

- Locate a noncustodial parent for the purpose of providing services
- Establish paternity for a child
- Establish an order for financial and medical support
- Enforce orders for financial and medical support
- Collect child support payments
- Modify your present child support order

**OCSE does not have the authority to provide assistance with custody or visitation issues.**

## **OCSE WILL DETERMINE THE BEST ENFORCEMENT METHODS AVAILABLE**

Each case is different. We will carefully study your case to decide which enforcement methods will be most effective. Depending on the individual situation, we may take any or all of the following actions:

- Contact the noncustodial parent
- Withhold child support from wages and lump sum payments
- Withhold child support from unemployment and worker's compensation benefits
- Suspend a driver's, commercial driver's, recreational, occupational, business, or technical license
- Intercept a tax refund
- Report the debt to credit bureaus

- Garnish or freeze bank accounts or other assets
- Notify an employer of the obligated parent to enroll the child in a health plan
- Place a hold on the issuance and reissuance of a passport
- Use other legal actions and collection remedies

The actions of OCSE are based on federal and state law. The enforcement methods mentioned above may not be possible in all cases and may not be appropriate at all times depending on the facts of your case.

### **THE COST OF CHILD SUPPORT ENFORCEMENT SERVICES**

If you choose to receive child support enforcement services, you will be charged fees for those services, unless you receive Medicaid or the child for whom you are seeking services receives ARKids 1st A or B. The amounts charged help to partially defray the cost to the state of Arkansas and to the taxpayers of providing those services to you. For more details of fees and costs, see the Charges Associated with Child Support section located in this booklet.

### **MEDICAL SUPPORT**

Federal regulations require OCSE to establish and/or enforce medical support for children receiving child support services. OCSE must establish an order addressing the health care needs of the children. Either parent may be ordered to provide medical support. If you currently have medical coverage from any source for your child and wish to continue to be the party providing this coverage, please indicate your preference in the Medical Support section of the Questionnaire in this booklet.

### **CHILD SUPPORT GUIDELINES**

The Arkansas Supreme Court has established guidelines for setting support obligation. The amount of support due will be set by a court according to those guidelines.

### **MODIFICATION**

You may request a review of your court order once every three years. If the amount of support ordered is different than the amount that should be paid according to the guidelines and there has been at least a 20% or \$100 per month change in gross income, OCSE will initiate action necessary to change the court order. The support amount may go up, go down, or stay the same. Every time an order is changed, the medical coverage needs of the children will be addressed.

A request for a review sooner than three years of the last court order can be considered if there have been changes in circumstances, according to OCSE policy, such as at least a 20% or \$100 per month change in income. The burden of proof is on the customer asking for the review. Contact your local child support office for more information.

### **LEGAL REPRESENTATION**

OCSE attorneys do not represent either party, but rather the state's interest in seeing that children receive the support to which they are entitled. For child support issues, you are not required to hire a private attorney, but you may choose to do so. If the noncustodial parent files a claim for custody or visitation with the child, the OCSE attorney cannot assist you, and you are encouraged to hire your own attorney. OCSE will work with your attorney. You or your attorney must contact us before taking any action that may affect your case. You or your attorney must give us copies of any documents or court orders that affect your child support case.

The noncustodial parent may also hire an attorney. Inform us immediately if you get letters or documents from the noncustodial parent or his or her attorney.

### **PROCESSING CHILD SUPPORT PAYMENTS**

The noncustodial parent or his or her employer must send all child support

payments to the Arkansas Child Support Clearinghouse.

Some noncustodial parents owe support to more than one household. When these parents do not make a full payment, each household receives an amount equal to its percentage share of the total owed if the payments were received through income withholding.

While OCSE makes every effort to correctly post and apply payments to your case, situations do occur that can result in money being sent to you that you are not entitled to keep. If you receive money that you are not entitled to keep or the IRS takes back a tax refund paid on your case, you will be notified as soon as OCSE knows of the problem. If an overpayment occurs in your case, OCSE will outline repayment options that you may choose so that you can return the money in a way that is easiest for you and your particular situation. Those options may include returning the payment in full or permitting OCSE to recover the payment by withholding a portion of the child support payments received in your case until the money is paid back. The child support services that you receive will not be affected by your choice regarding any requested repayment. In all cases, Arkansas law requires OCSE to take all appropriate actions necessary to recover the money. If you fail to make arrangements to return the money that you are not entitled to keep, OCSE may take legal action against you.

**If You Have Never Received TEA Benefits:**

Collections will be disbursed within two business days of their receipt by the Clearinghouse. The amount of support due and collected in the month plus any past due support collected will be paid to you. Payments collected in excess of what is owed to you will be distributed to any debt owed to the state, such as court costs or administrative fees owed by the noncustodial parent, or if no such fees are owed, will be counted as payments toward future months' support obligation and sent to you.

**If You Have Received TEA Benefits in the Past:**

If you received TEA in the past, any child support due but not paid during the period in which you received those benefits is owed to the state and is sometimes referred to as "assigned arrears." Payments collected from most sources will be paid to you for any current support or past due support owed to you. If payments are received from an interception of the noncustodial parent's federal tax refund, the payments will be applied to the assigned arrears until all such arrears have been paid in full.

**ARKANSAS STATE CLAIMS COMMISSION**

The Arkansas State Claims Commission does not have any information concerning your child support case and can only address issues dealing with a payment that was actually received by the Arkansas Child Support Clearinghouse and that you claim was mishandled in the way it was received, processed, or sent out to you. The Arkansas State Claims Commission cannot address any other aspect of your child support case. If you believe a mistake, which has not been resolved by OCSE, has occurred dealing solely with the way the Arkansas Child Support Clearinghouse has received, handled, or sent to you a child support payment, you may file a claim for the amount you believe you have lost with the Arkansas State Claims Commission. You may request a form and instructions on how to file that form from the Arkansas State Claims Commission by calling (501) 682-1619 or by going to their website at <http://claimscommission.ar.gov>.

**WE PROTECT YOUR PRIVACY**

Your privacy is protected by state and federal laws and regulations. OCSE will not give information about you to the noncustodial parent or other people without your permission except as permitted or as required by law. We may, as required by state or federal law, provide information about your case to other agencies, such as welfare

agencies or child support agencies in other states.

### **CUSTOMER SERVICE**

Should you have any questions or concerns regarding your case, please contact the local office assigned to your case. While you will have a caseworker assigned to your case, other personnel in the local office will be able to assist you. Local office contact information is listed in this booklet.

You can also communicate with your office by using our customer service website: MyCase. Go to [www.childsupport.arkansas.gov](http://www.childsupport.arkansas.gov) and click on the OCSE MyCase button. MyCase can provide you with information regarding the status of your case, recent payments, and allow you to easily update your address and contact information, as well as communicate with your caseworker.

As with any business, issues may come up which are difficult to resolve. If your local office is unable to answer your questions or concerns to your satisfaction, you may request an administrative review of your case. An office manager will conduct a review. You will be asked to submit your concern in writing or by email or by submitting an Administrative Review Request form, which is available for your convenience in each office, as well as on the OCSE website.

A supervisor will review your case thoroughly and provide a written response detailing his or her findings and any necessary action that will be taken to address your concerns. That written response will be mailed or emailed to you within 10 days of receipt of your request.

### **IF YOU NO LONGER RECEIVE PUBLIC ASSISTANCE**

If you were receiving TEA or Medicaid, including the Arkansas Health Care Independence Program, or your child was receiving ARKids 1st A or B and you are

no longer receiving those benefits, your child support case will remain open for enforcement services and you will be charged fees for those services. For more information on fees, see the OCSE Cost Recovery Schedule found in this booklet or go to our website at [www.childsupport.arkansas.gov](http://www.childsupport.arkansas.gov). If you choose, you may close your child support enforcement case by notifying the local OCSE office in writing that you want to close your case.

### **YOU MAY CLOSE YOUR CHILD SUPPORT ENFORCEMENT CASE**

If you no longer want to receive child support enforcement services, you may request that we close your case. Request that a "Request to Close Case" form be sent to you, or you may request case closure in writing. When we receive your request, we will no longer enforce your court order. Your case will remain open with the Arkansas Child Support Clearinghouse as a "payment processing case" so that any payments that may be received will be disbursed to you. Closing your case only means OCSE will no longer have any authority to take any enforcement action on your case. Your court order will remain in effect.

If your case is pending legal action at the time you request case closure, there may be a delay in closing the case until legal matters can be resolved.

If you owe fees and costs for the services provided to you in the past, you will be responsible for the payments of that debt and will receive a separate letter advising you of the balance owed and the options available for paying the amount owed.

If you close your enforcement case and have received cash assistance, such as TEA, in the past, OCSE will continue to intercept federal income tax refunds owed to the noncustodial parent to repay any unreimbursed grant due

to the state that was due but not paid during the time you received assistance.

### **OCSE MAY CLOSE YOUR CHILD SUPPORT CASE**

OCSE may close your case if any of the following occur:

- You intentionally withhold important information
- You accept child support payments directly from the noncustodial parent and do not send it to the Arkansas Child Support Clearinghouse
- You fail to cooperate in completing required forms or providing requested information
- You move and do not leave a forwarding address or phone number.

### **AUTOMATED PAYMENT INFORMATION**

For access to your payment and account information 24 hours a day, 7 days a week, go to [www.childsupport.arkansas.gov](http://www.childsupport.arkansas.gov) and click on the OCSE MyCase button; you will be prompted to create an account. You may also obtain payment information by calling our automated line at 1-800-264-2445. You will need to provide your case number when using either MyCase or the automated line; your case number will be provided to you by mail once your case has been opened.

### **RECEIVING YOUR CHILD SUPPORT PAYMENTS**

Payments are normally sent by electronic means to a prepaid debit card issued to you or by direct deposit to a bank account. Once a child support order is entered, a prepaid debit card will be issued to you automatically and mailed to your address. This is a prepaid card, not a credit card. There is no bank account or credit check required. Your payments are loaded directly on the card, and you can use the card to make purchases, get cash, and transfer money from the prepaid card to another bank account.

If you prefer to receive payments by direct deposit, you may print a direct deposit request form from the OCSE website at [www.childsupport.arkansas.gov](http://www.childsupport.arkansas.gov). Go to Forms and Publications, and from there click on Direct Deposit Enrollment. You may also request a form from your local office.

If electronic payments of your child support poses a hardship, you may submit an exemption request to receive payments by paper checks. Contact your local office and they will provide you with the required form.

**Please note: If you are receiving child support payments on any other cases by either the prepaid debit card or by direct deposit, you will continue to receive payments by that method.**

### **CHARGES ASSOCIATED WITH CHILD SUPPORT**

There is a charge for child support services. The amounts charged help to partially defray the cost to the state of Arkansas and to the taxpayers of providing those services to you.

NOTE: If you or your child receives Medicaid or ARKids 1st A or B, there are no fees charged to you. If you no longer receive those benefits at a later time, you will be charged fees as stated below.

Fees and costs for services are withheld from any support collected on your behalf at a rate of 13% of any payment received until the fees and costs are paid. You may view the fees assessed, balance remaining, and make a separate payment, if you choose, by registering for the OCSE MyCase customer service website. You will receive an annual notice which gives more detail of what you may owe.

If you have any questions about fees charged for child support services, please call your local child support office.

### OCSE cost schedule:

**Application fee per noncustodial parent - \$25.00.** The application fee is a flat fee that must be paid by the applicant at the time the application for services is submitted. This fee is required unless you or the child for whom you are seeking services is receiving Medicaid or ARKids 1st A or B.

**Monthly Base Cost – 13% of a total month’s collection not to exceed a maximum of \$18.00.** Includes overhead costs and activities other than legal services. The fee is only assessed if there was a payment received in the previous month.

**In addition to the monthly Base Cost, other costs you could incur are as follows:**

#### Legal Action

If the court orders the noncustodial parent to pay court costs and attorney fees, or for the cost of paternity testing, OCSE will take action to collect those costs and fees and reimburse you for any amounts you have paid under your contract with OCSE.

- **Initiation of Legal Action - \$80.00.**  
Assessed when a complaint, motion or petition with summons, order and citation, affidavit and arrest warrant, notice/order of hearing, or other legal document is prepared and forwarded to the clerk for processing in all cases (child support, paternity, interstate, criminal nonsupport, and contempt).
- **Out-of Court Settlement - \$100.00.**  
Assessed when the initiated court action is resolved prior to court appearance in all cases.
- **In-Court Settlement - \$150.00.**  
Assessed when the initiated court action is resolved at the court appearance without trial.
- **Trial - \$250.00.**  
Assessed when the initiated court action is resolved by the court after a hearing is held.

### Other

- **Actual costs** will be assessed, based on actual costs incurred by the agency for transcripts of trials or depositions, service of process fees, the cost of any paternity test, filing fees, all other court costs, and the federal offset program fees.
- **Financial Institution Levy Fee - \$35.00.**  
This fee will be charged for each levy which results in a monetary recovery from a participating financial institution or a levy against an insurance claim.
- **Insurance Claim Levy Fee - \$35.00.**  
This fee will be charged for each levy that results in a monetary recovery from an insurance claim.

### PROCESSING YOUR ENROLLMENT FORM FOR CHILD SUPPORT SERVICES

Please complete and return the Questionnaire included in this booklet, as well as the Application and Contract for Child Support Services. However, if you receive Medicaid services for yourself, complete the Questionnaire, but do not sign the Application and Contract for Child Support Services.

The disclosure of your Social Security number is mandated by Public Law 104-193 in order that the Office of Child Support Enforcement may provide services related to the establishment of paternity and the establishment, modification, and enforcement of child support obligations.

Mail or take the required forms to your local child support office or mail it to OCSE, P.O. Box 8133, Little Rock, AR 72203. The original signed forms will be retained in your file. Please keep a copy for your records.

Also include copies of the original child support order, if there is one. If the original order has been modified (changed) one or more times, include copies of the modified orders.

If payments have been made to you through another state or through the clerk of court, include a copy of the child support payment records. You can get payment records from the clerk of court in the county and state where the order was filed or from the child support clearinghouse where you were receiving support. Include a statement, signed by you, listing all payments you received directly from the noncustodial parent or potential father.

If paternity needs to be established, please provide a copy of the child's birth certificate. If an Acknowledgement of Paternity was signed, provide that form. Copies of these forms are available at the Vital Records agency in the state where the child was born.



## Arkansas Child Support Enforcement Offices

Local Office	Address	Phone	Email	Counties Served
Batesville OCSE	1602 Batesville Blvd. PO Box 3881 Batesville, AR 72503	870-251-4333 888-422-4780	support.batesville@ocse. arkansas.gov	Cleburne, Fulton, Independence, Izard, Stone
Benton OCSE	318 Edison Ave, Ste 4 Benton, AR 72015	501-860-6162 888-707-6273	support.benton@ocse. arkansas.gov	Grant, Hot Spring, Saline
Berryville OCSE	803 Champlin St. PO Box 637 Berryville, AR 72616	870-423-2979	support.berryville@ocse. arkansas.gov	Baxter, Boone, Carroll, Marion, Newton
Blytheville OCSE	1102 Byrum Rd PO Box 28 Blytheville, AR 72316	870-763-5970	support.blytheville@ocse. arkansas.gov	Mississippi
Camden OCSE	793 California Ave. PO Box 580 Camden, AR 71711	870-837-1838 800-300-6897	support.camden@ocse. arkansas.gov	Cleveland, Ouachita
Conway OCSE	Ste 107 2455 Washington Ave, Conway, AR 72032	501-329-1721 800-564-4111	support.conway@ocse. arkansas.gov	Faulkner, Searcy, Van Buren
El Dorado OCSE	2708 West Vine St PO Box 570 El Dorado, AR 71731	870-862-9785 800-927-5728	support.eldorado@ocse. arkansas.gov	Calhoun, Columbia, Dallas, Union
Forrest City OCSE	3945 N. Washington PO Box 1855 Forrest City, AR 72336	870-633-7745 866-633-7745	support.forrestcity@ocse. arkansas.gov	Cross, Lee, Monroe, St. Francis, Woodruff
Helena- West Helena OCSE	648 North Sebastian PO Box 2502 Helena-W.Helena, AR 72390	870-572-3545 800-304-4844	support.westhelena@ocse. arkansas.gov	Phillips
Hope OCSE	811 N. Hervey PO Box 1261 Hope, AR 71801	870-777-8400 800-770-8401	support.hope@ocse. arkansas.gov	Hempstead, Howard, Little River, Nevada, Pike
Hot Springs OCSE	2228 Albert Pike, Ste H Hot Springs, AR 71913	501-321-1561	support.hotsprings@ocse. arkansas.gov	Clark, Garland
Jonesboro OCSE	2006 Latourette Drive PO Box 16600 Jonesboro, AR 72403	870-972-5510 888-390-5510	support.jonesboro@ocse. arkansas.gov	Craighead Greene Poinsett
Little Rock OCSE	322 S. Main St., Ste 100 PO Box 8057 Little Rock, AR 72203	501-371-5400	support.littlerock@ocse. arkansas.gov	Pulaski Perry

<b>Local Office</b>	<b>Address</b>	<b>Phone</b>	<b>Email</b>	<b>Counties Served</b>
Lonoke OCSE	115 Jefferson St PO Box 499 Lonoke, AR 72086	501-676-2736	support.lonoke@ocse.arkansas.gov	Lonoke
Lowell OCSE	122 N Bloomington, Ste A PO Box 769 Lowell, AR 72745	479-770-5443	support.lowell@ocse.arkansas.gov	Benton Madison Washington
McGehee OCSE	504 Hwy 65 N McGehee, AR 71654	870-222-4818 866-222-4525	support.mcgehee@ocse.arkansas.gov	Chicot Desha
Mena OCSE	806 10th St Mena, AR 71953	479-394-6339 800-553-4752	support.mena@ocse.arkansas.gov	Montgomery Polk Scott
Monticello OCSE	428A West Gaines Monticello, AR 71655	870-367-8763 800-358-3026	support.monticello@ocse.arkansas.gov	Ashley Bradley Drew
Pine Bluff OCSE	3023 West 28th Ave PO Box 5809 Pine Bluff, AR 71611	870-534-5271	support.pinebluff@ocse.arkansas.gov	Jefferson Lincoln
Pocahontas OCSE	1905 Old County Rd PO Box 427 Pocahontas, AR 72455	870-892-4911 877-744-7770	support.pocahontas@ocse.arkansas.gov	Clay, Jackson, Lawrence, Randolph, Sharp
Russellville OCSE	800 E Main St, Ste A Russellville, AR 72801	479-968-7051 800-342-5512	support.russellville@ocse.arkansas.gov	Conway, Johnson, Pope, Yell
Searcy OCSE	2701 E Race, Ste 2 PO Box 590 Searcy, AR 72145	501-268-6164 800-647-1677	support.searcy@ocse.arkansas.gov	Prairie White
Stuttgart OCSE	211 S Leslie St PO Box 970 Stuttgart, AR 72160	870-673-2721	support.stuttgart@ocse.arkansas.gov	Arkansas
Texarkana OCSE	Ste 400 210 N State Line Ave Texarkana, AR 71854	870-772-3443 866-213-6643	support.texarkana@ocse.arkansas.gov	Lafayette, Miller, Sevier
Van Buren OCSE	3132 Alma Blvd Van Buren, AR 72956	479-471-8855 800-219-0134	support.vanburen@ocse.arkansas.gov	Crawford, Franklin, Logan, Sebastian
West Memphis OCSE	3821 N Airport Rd Marion, AR 72364	870-739-2555	support.westmemphis@ocse.arkansas.gov	Crittenden

\*Office moves may have occurred since the printing of this publication. You may want to call before visiting an office.



# Office of Child Support Enforcement

<i>Office Use Only</i>	
Date Requested: _____	
Date Provided: _____	
Fee Paid: _____	Date Received: _____
Receipt #: _____	Case ID: _____

## Questionnaire

This Questionnaire is necessary in order to provide child support services. Fill out the Questionnaire completely. The more information we have, the better we are able to help you.

The disclosure of your Social Security number is mandated by Public Law 104-193 in order that the Office of Child Support Enforcement (OCSE) may provide services related to the establishment of paternity and the establishment, modification, and enforcement of child and/or medical support obligations.

If you receive Medicaid benefits for yourself, including Arkansas Works, complete and return only this questionnaire. All other persons seeking child support enforcement services must return both this Questionnaire and the Contract for Services. A \$25.00 application fee is required from all applicants except those who receive Medicaid, including Arkansas Works, or whose child is receiving ARKids 1st A or B. You may return these forms to the local child support office nearest you or mail it to OCSE, P.O. Box 8133, Little Rock, AR 72203.

Be sure to include the following:

- Copies of the original child support order, if there was one, and any modified (changed) orders. Also include copies of any guardianship or custody orders, juvenile orders, temporary orders, probate orders, or orders of adoption.
- Payment records from the clerk of court or a child support agency in another state.
- Copies of the child's or children's birth certificates and/or Acknowledgments of Paternity, if one was signed.

Information About You			
Name			
Physical Address			
City, State, Zip			
Mailing Address			
City, State, Zip			
Phone	Home (    )	Work (    )	Cell (    )
Email			
Social Security Number			Date of Birth

Employer Name	
Employer Address	
City, State, Zip	
Employer Phone Number	
Race: <input type="checkbox"/> Caucasian <input type="checkbox"/> African American <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian <input type="checkbox"/> American Indian: Tribe _____ <input type="checkbox"/> Other: _____	
Are you or the children under an order of protection? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide a copy of the order.	
Are you currently receiving the following services? SSI: <input type="checkbox"/> Yes <input type="checkbox"/> No SSA/SSD: <input type="checkbox"/> Yes <input type="checkbox"/> No VA Benefits: <input type="checkbox"/> Yes <input type="checkbox"/> No Worker's Compensation: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you receive for yourself and/or the children listed any of the following? TEA: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide your TEA case number _____ Medicaid, including the Arkansas Health Care Independence Program: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide your case number _____ ARKids 1 <sup>st</sup> A or B: <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide the ARKids case number _____	
Have you ever in the past received cash public assistance (also known as TEA or TANF)? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide the state or tribal name(s) and the time frame during which assistance was received. State or tribe: _____ Years of assistance: from _____ to _____ State or tribe: _____ Years of assistance: from _____ to _____ State or tribe: _____ Years of assistance: from _____ to _____	
Do you have an attorney representing you on any matter related to the other parent? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please provide the following information about the attorney: Name: _____ Address: _____ Phone number: _____	

Information About The Children		
Please provide the following information for each child for whom you are seeking services.		
<b>Child 1:</b> Full legal name (first, middle, last)	Date of birth	Sex
Social Security number	Race	Place of birth (county & state)
Has a support order been established for this child?	Was a Paternity Acknowledgment completed?	
<b>Child 2:</b> Full legal name (first, middle, last)	Date of birth	Sex
Social Security number	Race	Place of birth (county & state)
Has a support order been established for this child?	Was a Paternity Acknowledgment completed?	

<b>Child 3:</b> Full legal name (first, middle, last)		Date of birth	Sex
Social Security number	Race	Place of birth (county & state)	
Has a support order been established for this child?		Was a Paternity Acknowledgment completed?	
<b>Child 4:</b> Full legal name (first, middle, last)		Date of birth	Sex
Social Security number	Race	Place of birth (county & state)	
Has a support order been established for this child?		Was a Paternity Acknowledgment completed?	
<b>Child 5:</b> Full legal name (first, middle, last)		Date of birth	Sex
Social Security number	Race	Place of birth (county & state)	
Has a support order been established for this child?		Was a Paternity Acknowledgment completed?	
<p>Is the noncustodial parent ordered by a court order to pay child support? ___ Yes ___ No          If yes, which court (county &amp; state/tribe/country)? _____          What is the court-ordered amount? _____          What is the payment schedule (weekly, monthly, bi-monthly)? _____          Amount of back support owed: _____ as of _____ (date)          Date and amount of last payment: _____</p> <p>Was spousal support/alimony ordered? ___ Yes ___ No          If so, do you want OCSE to collect on that obligation: ___ Yes ___ No</p>			
<p><b>If you are the biological parent</b> of the child or children for whom you are requesting services, provide the following information:</p> <p>Are you currently or have you ever been married? ___ Yes ___ No          If yes, please provide the following information:          Name of current spouse: _____ Date of marriage: _____          Name of past spouse(s): _____ Date(s) of marriage: _____          Dates of divorce: _____</p>			

Please provide the following information about your legal relationship to the noncustodial parent:

Never married to each other

Married on \_\_\_\_\_ (date) in \_\_\_\_\_ (state & county/tribe/country)

Legally separated on \_\_\_\_\_ (date) in \_\_\_\_\_ (state & county/tribe/country)

Divorced on \_\_\_\_\_ (date) in \_\_\_\_\_ (state & county/tribe/country)

Divorce pending in \_\_\_\_\_ (state & county/tribe/country)

Other \_\_\_\_\_

**If you are not the biological parent** of the child or children for whom you are requesting service, please answer the following:

How are you related to the child? \_\_\_\_\_

What are the names of the biological mother and father of the child? \_\_\_\_\_

Do you have a court order declaring you as the child's legal guardian?  Yes  No

Was the mother married at the time the child was born?  Yes  No  Don't know

### Information About Medical Coverage

Does the child or children for whom you are requesting services currently receive medical coverage other than ARKids 1st?  Yes  No (if no, continue to the section Information About the Noncustodial Parent)

If yes, please provide the following information:

Name of insurance company: \_\_\_\_\_

Address, city and zip: \_\_\_\_\_

Policy number: \_\_\_\_\_

Subscriber/member number: \_\_\_\_\_

Who provides the insurance?  Myself  Noncustodial parent  Step-parent

Other, please explain: \_\_\_\_\_

Does the child receive secondary medical coverage?  Yes  No

Please explain: \_\_\_\_\_

Is health insurance available through your employer?  Yes  No

I prefer to have the responsibility to provide medical coverage for the children listed above.  Yes  No

### Information About The Noncustodial Parent

You may or may not know the following information about the noncustodial parent. Please provide information to the best of your ability.

Full Name			
Alias or Nicknames			
Physical Address			
City, State, Zip			
Mailing Address			
City, State, Zip			
Phone	Home ( )	Work ( )	Cell ( )
Email			
Social Security Number	Date of Birth or Approximate Age		

Employer Name	
Address	
City, State, Zip	
Physical Description of the other parent: Eye Color _____ Hair Color _____ Height _____ Weight _____ Marks (tattoos, scars, piercings, etc.) _____	
Race: ___Caucasian ___African American ___Hispanic ___Asian ___American Indian: Tribe _____ ___Other: _____	
What are the names of the mother and father of the noncustodial parent, even if they are deceased? Father's full name: _____ Mother's full name, including maiden name if known: _____	
Does the noncustodial parent currently receive any of the following: SSI? ___Yes ___No ___Not Known SSA/SSD? ___Yes ___No ___Not Known VA Benefits? ___Yes ___No ___Not Known TEA? ___Yes ___No ___Not Known Worker's Compensation? ___Yes ___No ___Not Known	
Has the noncustodial parent ever been in the military? ___Yes ___No ___Not Known If yes, what branch? _____	Has the noncustodial parent ever been in jail or prison? ___Yes ___No ___Not Known If yes, where? _____
Does the noncustodial parent own a car? ___Yes ___No ___Not Known Year _____ Make/Model _____ License Number _____ State _____	
If the noncustodial parent is currently unemployed, please provide the information for the last known employer to the best of your knowledge: Company name: _____ Phone: _____ Address: _____	
Is the noncustodial parent currently married? ___Yes ___No ___Not Known If yes, list name of the current spouse: _____	
Is the other parent represented by an attorney? ___Yes ___No ___Not Known If yes, please provide the following information about the attorney: Name: _____ Phone: _____ Address: _____	
Where did the noncustodial parent attend high school? _____	
How did you and the noncustodial parent meet? _____	
Please list any other information that you feel will help OCSE in working your case. For example: professional, business, or a commercial driver's license; other names he or she may use; address where his or her parents reside; name of any other children the noncustodial parent may have.	

<b>How did you learn about our services?</b> (Check all that apply)	
<input type="checkbox"/> Another state agency	<input type="checkbox"/> Internet
<input type="checkbox"/> Brochure	<input type="checkbox"/> Letter from OCSE
<input type="checkbox"/> Child Care referral	<input type="checkbox"/> Newspaper /print ad
<input type="checkbox"/> Educational presentation	<input type="checkbox"/> Radio
<input type="checkbox"/> Expos and fairs	<input type="checkbox"/> Referred by someone
<input type="checkbox"/> I am re-opening my case	<input type="checkbox"/> Other-please explain _____

**Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**\*\*\* NOTICE \*\*\***

**THIS APPLICATION AND CONTRACT MUST BE SIGNED AND INCLUDED WHEN YOU  
SUBMIT THE QUESTIONNAIRE.**

**HOWEVER, IF YOU ARE A RECIPIENT OF MEDICAID, INCLUDING ARKANSAS  
WORKS, DO NOT SIGN AND RETURN THIS FORM.**

**Application and Contract for Child Support Services**

The applicant hereby and herein:

1. Authorizes the agency to assign legal counsel of its choice to act on behalf of the agency and applicant's assigned interest, and be the attorney of record for the agency to establish paternity and/or a monthly support obligation, and to enforce payment of such obligation. The attorney does not represent the applicant. There is no attorney/client relationship created between the applicant and the attorney.
2. Understands that the OCSE attorney represents the State's interest in having children adequately supported and in collecting overdue support. The applicant retains the right to employ separate private counsel.
3. Agrees that the agency shall have the right to collect from the noncustodial party both current and past due support payments in the amount provided by the support order.
4. Agrees that the agency, rather than the applicant, shall have any and all rights, title and interest in any and all property belonging to the noncustodial parent against which a claim may be placed for the collection of child/spousal support.
5. Agrees to forward to OCSE any and all support payments which he or she receives directly from the noncustodial parent after the date of acceptance of this Application and Contract.
6. Agrees to notify OCSE of any changes in the applicant's address.
7. Agrees to notify OCSE of any Court action which may change or affect the support order.
8. Agrees to notify OCSE of changes to medical coverage, such as participation in ARKids 1st or Medicaid, including Arkansas Works.
9. Agrees that the agency retains all rights to enforce and collect child support arrearages and child support judgments in an amount equal to any unreimbursed Transitional Employment Assistance (TEA) grant which the applicant received prior to this Contract. Should this contract be cancelled or terminated, the applicant understands and agrees that OCSE will continue to pursue the collection of TEA grant through IRS tax intercept until the debt owed to the State is satisfied.
10. Agrees to pay all costs and fees charged for child support enforcement services pursuant to the Cost Schedule except while participating in ARKids 1st A or B or if receiving public benefits such as TEA or Medicaid in the future. A copy of the cost schedule for services was provided to the applicant with this Application and Contract for Services and is incorporated herein by reference. The applicant understands costs and fees will be deducted from support collected at a rate not to exceed 13% of the total amount collected or the actual fees and costs due, whichever is less. The applicant understands that in interstate cases the responding state may charge additional costs. The applicant further understands that if enrollment in ARKids 1st A or B ceases, the applicant agrees to pay all costs and fees charged for child support enforcement services pursuant to the cost Schedule for Services that was provided to the applicant with this Application and Contract for Services but not previously imposed due to their participation in ARKids 1st A or B.
11. Understands the agency will disburse support payments electronically to a prepaid debit card

unless the applicant requests payment to be made by direct deposit or is granted an exemption.  
12. Acknowledges that if situations occur where money is received to which the applicant is not entitled, the money must be returned voluntarily to OCSE, or, as required by Arkansas law, OCSE will take the appropriate actions necessary to recover that money. Any decision made regarding the method of recovery of the money will not preclude or affect child support services being provided to you by OCSE.

The agency herein:

1. Agrees to provide assistance in establishing a support obligation and paternity if needed, and/or collecting support on behalf of the applicant's minor children in such amount as is, or may be, provided for by a support order.
2. Agrees to assign legal counsel for establishment, collection and enforcement of child support (including paternity establishment), and medical insurance premiums. The agency undertakes no representation of the applicant on custody, visitation or any other legal issues.
3. Agrees that the applicant retains the right to hire private counsel to represent his/her interests in any issue.
4. Agrees to exercise reasonable effort to establish an obligation and to make collections of child support on behalf of the applicant's children and spousal support on behalf of applicant, if included in an existing child support order.
5. Agrees to post and disburse, within two business days of identification, amounts collected on behalf of the applicant less the deduction for costs as specified herein. EXCEPTION: Interceptions from bank accounts and insurance lump sums will be held for 10 days before disbursing. Federal tax disbursements may be delayed up to six months if the refund is subject to adjustment from the IRS.

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Signature of Applicant for Services

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Date

## NOTES

## NOTES

## NOTES





**Arkansas Office of Child Support Enforcement  
Department of Finance and Administration**

*[www.childsupport.arkansas.gov](http://www.childsupport.arkansas.gov)*

