

Fòm sa a gen enfòmasyon ki gen restriksyon.

MARYLAND PARENTING PLAN TOOL
ZOUTI PLANIFIKASYON PARANTAL MARYLAND

NOTES:

REMAK:

- Use this form to create a parenting plan for your child(ren). A parenting plan is a guide for how parties will make decisions about the child(ren) and handle conflicts. Complete this form separately, together, or with a mediator. Attach additional sheets if needed.
Sèvi ak fòm sa a pou kreye yon plan pou pitit ou a (yo). Yon plan paran se yon gid sou ki jan pati yo pral pran desizyon sou timoun nan (yo) ak jere konfli yo. Ranpli fòm sa a separeman, ansanm, oswa avèk yon medyatè. Tache fèy papyè adisyonèl si sa nesesè.
- If you and the other party/parties cannot agree on a comprehensive parenting plan, complete a Joint Statement of the Parties Concerning Decision-Making Authority and Parenting Time (form CC-DR-110).
Si ou menm ak lòt pati a/pati yo pa ka dakò sou yon plan paran konplè, ranpli yon deklarasyon komen pati yo konsènan otorite pou pran desizyon ak tan paran (Fòm CC-DR-110).
- “Party”: A person seeking to establish or maintain a parent-child relationship with the child(ren).
“Pati”: Yon moun k ap chèche etabli oswa kenbe yon relasyon paran-pitit ak timoun nan (yo).
- You must file a Notice Regarding Restricted Information Pursuant to Rule 20-201.1 (form MDJ-008) with this submission.
Ou dwe depoze yon avi konsènan enfòmasyon ki gen restriksyon dapre Règleman 20-201.1 (Fòm MDJ-008) ak soumisyon sa a.

☐ Parenting plan of _____,

Plan paran _____,

Name of party
Non Pati a

Relationship to child(ren)
Relasyon a timoun nan(yo)

☐ Joint parenting plan of:

Plan paran an komen:

Name
Non

Relationship to Child(ren)
Relasyon a timoun nan(yo)

Type of filing:

Tip Depozisyon:

- ☐ Initial pleading
Akt pwosedi Inisyal
- ☐ Modification
Modifikasyon
- ☐ Relocation
Relokasyon

Special circumstances: (choose all that apply)

Sikonstans Espesyal: (chwazi tout sa ki aplike)

- ☐ Allegation of domestic abuse (under Family Law Art., § 4-501)
Akizasyon sou abi domestik (anba atizay lalwa fanmi an., § 4-501)
- ☐ Supervised parenting time requested (abuse of a parent, child, or drug/alcohol addiction)
Demand tan paran ki sipèvize (abi sou yon paran, timoun, oswa dwòg/adiksyon alkòl)
- ☐ Other: (describe): _____

Lòt: (dekri): _____

BIOGRAPHICAL INFORMATION

ENFÒMASYON BIOGRAFIK

Party 1

Pati 1

Name: _____

Non: _____

Address: ☐ Address unknown

Adrès: Adrès enkonni

☐ Address confidential due to:

Adrès konfidansyèl akòz:

☐ protective order that expires _____

òdonans pwoteksyon ki ekspire _____

Date

Dat

☐ other court order: _____, entered _____

Lòt òdonans tribinal: _____, te anrejistre nan _____

Date

Dat

Street Address: _____

Adrès lari: _____

City, State, Zip: _____

Vil, Eta, Kòd Postal: _____

Phone: _____ **E-mail:** _____

Tel: _____ **Imèl:** _____

Party 2

Pati 2

Name: _____

Non: _____

Address: ☐ Address unknown

Adrès: Adrès enkonni

☐ Address confidential due to:

Adrès konfidansyèl akòz:

☐ protective order that expires _____

òdonans pwoteksyon ki ekspire _____

Date

Dat

☐ other court order: _____, entered _____

Lòt òdonans tribinal: _____, te anrejistre nan _____

Date
Dat

Street Address: _____

Adrès lari: _____

City, State, Zip: _____

Vil, Eta, Kòd Postal: _____

Phone: _____ E-mail: _____

Tel: _____ Imèl: _____

Party 3

Party 3

Name: _____

Non: _____

Address: ☐ Address unknown

Adrès: Adrès enkonni

☐ Address confidential due to:

Adrès konfidansyèl akòz:

☐ protective order that expires _____

òdonans pwoteksyon ki ekspire _____

Date
Dat

☐ other court order: _____, entered _____

Lòt òdonans tribinal: _____, te anrejistre nan _____

Date
Dat

Street Address: _____

Adrès lari: _____

City, State, Zip: _____

Vil, Eta, Kòd Postal: _____

Phone: _____ E-mail: _____

Tel: _____ Imèl: _____

Child(ren)

Timoun(yo)

This parenting plan is for the following minor child(ren) *(add lines or attach additional sheets if needed)*:

Plan paran sa a se pou timoun minè sa (yo) *(ajoute liy oswa tache fèy adisyonèl si sa nesèsè)*:

Name
Non

Date of Birth
Dat Nesans

PARENTAL RESPONSIBILITIES

RESPONSABILITE PARAN YO

Choose from the general options below or make choices based on what is important to your family.

Chwazi nan opsyon jeneral ki anba yo oswa fè chwa ki baze sou sa ki enpòtan pou fanmi ou.

1. DECISION-MAKING AUTHORITY

OTORITE POU PRAN DESIZYON

Parental responsibility – Day-to-day decisions are the responsibility of the party/parties the child(ren) are with at the time, such as how the child(ren) dress(es), or their home routine. How will major decisions such as medical and mental health care, education, religious training, extracurricular activities, communication among the parties, and information sharing be made?

Responsablite paran yo – Desizyon chak jou yo se responsablite pati a/pati yo ke timoun nan (yo) avek nan moman sa a, tankou ki jan timoun nan (yo) mete rad, oswa woutin lakay yo. Kijan gwo desizyon tankou swen sante ak sante mantal, edikasyon, fòmasyon relijye, aktivite ki pa nan pwogram akademik lan, komunikasyon nan mitan pati yo, ak pataje enfòmasyon ki fèt?

(choose one)

(chwazi yonn)

☐ **Shared parental responsibility**

Responsabilite Paran Pataje

We will **jointly** make major decisions about the child(ren).

Nou pral **ansanm** pran gwo desizyon sou timoun nan (yo).

☐ **Sole parenting responsibility**

Responsablite Paran Esklizif

_____ will make major decisions for the child(ren).

_____ pral pran gwo desizyon sou timoun nan (yo).

Name

Non

☐ **Shared parental responsibility with decision-making authority**

Responsablite paran Pataje yo ak otorite pou pran desizyon

We will try to reach an agreement on issues. If we cannot agree, tie-breaking authority goes to the following party:

Nou pral eseye rive jwenn yon akò sou pwoblèm yo. Si nou pa ka dakò, otorite pou depataje ale pou pati ki anba a:

Tie-breaking authority

Otorite pou depataje

Medical care

Sejwen Medical

Name

Non

☐ No tie-breaking authority
Oken Otorite pou depataje

Mental health

Sante Mantal

Name

Non

☐ No tie-breaking authority
Oken Otorite pou depataje

Education

Edikasyon

Name

Non

☐ No tie-breaking authority
Oken Otorite pou depataje

Religious training
Fòmasyon relijye

Name
Non

☐ No tie-breaking authority
Oken Otorite pou depataje

Extracurricular activities
Aktivite ki pa nan pwogram
akademik lan

Name
Non

☐ No tie-breaking authority
Oken Otorite pou depataje

Other:
Lòt:

Name
Non

☐ No tie-breaking authority
Oken Otorite pou depataje

Communication between the parties – How will you communicate with each other about the child(ren)? Do not use the child(ren) as messengers to convey information, ask questions, or set up schedule changes. We will communicate with each other: *(choose all that apply)*

Kominikasyon ant pati yo – ki jan ou pral kominike youn ak lòt sou timoun nan (yo)? Pa itilize timoun nan (yo) kòm mesaj pou transmèt enfòmasyon, poze kesyon, oswa etabli chanjman orè. Nou pral kominike youn ak lòt: *(Chwazi tout sa ki aplike)*

- ☐ In person
Fas a fas
- ☐ By telephone
Pa telefòn
- ☐ By text or similar method
Pa tèks oswa metòd similè
- ☐ By e-mail
Pa imèl
- ☐ Other: _____
Lòt: _____

Information sharing – How will you share and access information about the child(ren)’s health, mental health, education, and welfare? Be listed as emergency contacts? Notify each other about changes to your address or contact information?

Pataje Enfòmasyon– Kijan ou pral pataje ak jwenn aksè nan enfòmasyon sou sante timoun lan (yo), sante mantal, edikasyon, ak byennèt? Dwe liste kòm kontak ijans? Notifye youn ak lòt sou chanjman adrès ou oswa enfòmasyon kontak?

(choose all that apply)

(Tcheke tout sa ki aplike)

- ☐ Each of us will have access to medical and school records and information about the child(ren) and may consult with professionals.
Chak nan nou ap gen aksè a dosye medikal ak lekòl ak enfòmasyon sou timoun nan (yo) epi yo ka konsilte avèk pwofesyonèl yo.
- ☐ Each of us will share information about the health, mental health, education, and welfare of the child(ren) and sign documentation ensuring that we each have access to records.
Chak nan nou pral pataje enfòmasyon sou sante, sante mantal, edikasyon, ak byennèt timoun nan (yo) epi siyen dokiman pou asire ke nou chak gen aksè a dosye.
- ☐ We will give each other advance notice of medical appointments and appointments with the child(ren)’s school.
Nou pral bay chak lòt avi davans pou randevou medikal ak randevou lekòl timoun nan (yo).
- ☐ Each of us will get records and reports from the school and health care providers. Each of us have equal rights to inspect and receive governmental agency and law enforcement records concerning the child(ren).

Chak nan nou pral jwenn dosye ak rapò ki soti nan lekòl la ak founisè swen sante. Chak nan nou gen dwa egal pou enspekte ak resevwa ajans gouvènman an ak dosye ki fè respekte lalwa konsènan timoun (yo).

- ☐ Each of us may consult with the child(ren)'s school, day care, health care providers, and other programs about the child(ren)'s health, mental health, educational, emotional, and social progress.

Chak nan nou ka konsilte avèk lekòl timoun lan (yo), gadri, founisè swen sante, ak lòt pwogram sou pwogrè sante timoun (yo), sante mantal, edikasyon, emosyonèl, ak sosyal

- ☐ Each of us will be listed as “emergency contacts” for the child(ren) on all matters.

Chak nan nou yo pral endike kòm “kontak ijans” pou timoun nan (yo) nan tout ka.

- ☐ Each of us will give a residential, mailing, and contact address and telephone number to the other party/parties and notify each other in writing (may be by text or email) within 24 hours of changes.

Chak nan nou pral bay yon adrès rezidansyèl, lapòs, ak kontak ak nimewo telefòn bay lòt pati a/pati yo epi avize chak lòt alekri (ka pa tèks oswa imèl) nan lespas 24 èdtan chanjman an.

- ☐ Other: _____

Lòt: _____

Schooling – What type of schooling will the child(ren) have (for example, will the child(ren) attend public or private schools or be home schooled)? Which party's address will be used to determine the child(ren)'s school district?

Eskolarite– Ki kalite eskolarite timoun nan (yo) gen (pa egzanp, èske timoun nan (yo) ale nan lekòl piblik oswa prive oswa lekòl lakay ou)? Adrès pati ki pral itilize pou detèmine distri lekòl timoun lan (yo)?

We agree that the child(ren) will:

Nou dakò ke timoun nan (yo) pral:

- ☐ Attend public school. _____ address will be designated for
Name's
school registration.

Ale nan lekòl piblik. _____ adrès yo pral deziyen pou
Non
enskripsyon lekòl la.

- ☐ Attend private school.

Ale nan lekòl prive.

- ☐ Be homeschooled.

Lekòl lakay.

- ☐ Other: _____

Lòt: _____

Extracurricular activities – How will you manage activity calendars for practices, rehearsals, games recitals, etc.? How will you handle conflicts with parenting time and exchange of activity calendars?

Aktivite ekstraskolè yo – Kijan ou pral jere kalandriye aktivite pou pratik, repetisyon, jwèt resital, elatriye? Kijan ou pral jere konfli ak tan paran ak echanj kalandriye aktivite yo?

(choose all that apply)

(Tcheke tout sa ki aplike)

- ☐ Each of us will agree to extracurricular activities that may occur during each party's scheduled parenting time.

Chak nan nou pral dakò ak aktivite andeyò lekòl ki ka rive pandan tan paran ki prevwa pou chak pati yo.

- ☐ Each of us will transport the child(ren) to and from all extracurricular activities during each party's scheduled parenting time.

Chak nan nou pral transpòte timoun nan (yo) pou ale ak pou soti nan tout aktivite andeyò lekòl la pandan tan paran ki prevwa pou chak patiyo.

- ☐ Each of us may register the child(ren) for an activity of the child(ren)'s choice, so long as it does not interfere with the other party's/parties' parenting time.

Chak nan nou ka enskri timoun nan (yo) pou yon aktivite nan chwa timoun lan (yo), toutotan li pa entèfere ak tan paran lòt pati a/pati yo '.

- ☐ Each of us agrees as to the following extracurricular activities: _____

Chak nan nou dakò sou aktivite ekstraskolè sa yo: _____

2. PARENTING TIME

TAN PARAN

What parenting time schedule will work best for your family?

Ki orè tan paran ki pral fonksyone pi byen pou fanmi ou?

Special considerations: (choose all that apply)

Konsiderasyon Espesyal yo: (chwazi tout sa ki aplike)

- ☐ We will not use drugs during our time with the child(ren).
Nou pa pral sèvi ak dwòg pandan tan nou ak timoun nan (yo).

- ☐ We will not drink alcohol during our time with the child(ren).
Nou pa pral bwè ak alkòl pandan tan nou ak timoun nan (yo).

- ☐ We understand emergencies happen. We will accommodate reasonable changes that are timely requested.
Nou konprann ijans yo rive. Nou pral akomode chanjman ki rezonab ke yo mande alè.

- ☐ Other: _____

Lòt: _____

Regular weekday and weekend schedule-

Regilye jou lasemèn ak orè fen semèn-

- ☐ The following schedule begins on _____ with _____
Date Name

and continues as follows:

Orè ki anba la a kòmanse nan _____ ak _____
Dat Non

epi kontinye jan sa a:

The child(ren) will be with _____:
Name

Timoun nan (yo) ap avèk _____:
Non

- ☐ **Weekends:** ☐ every ☐ every other ☐ other: (specify) _____ from _____ to _____.

Wikenn: chak chak lòt lòt: (*presize*) _____ soti nan
_____ pou rive _____.

☐ **Weekdays:** (*specify days*) _____ from
_____ to _____.

Jou lasemèn: (*presize jou*) _____ soti nan
_____ pou rive _____.

☐ **Other:** (*describe*) _____

The child(ren) will be with _____:
Name

Lòt: (*dekri*) _____

Timoun nan (yo) ap avèk _____:
Non

☐ **Weekends:** ☐ every ☐ every other ☐ other: (*specify*) _____ from
_____ to _____.

Wikenn: chak chak lòt lòt: (*presize*) _____ soti nan
_____ pou rive _____.

☐ **Weekdays:** (*specify days*) _____ from
_____ to _____.

Jou lasemèn: (*presize jou*) _____ soti nan
_____ pou rive _____.

☐ **Other:** (*describe*) _____

The child(ren) will be with _____:
Name

Lòt: (*dekri*) _____

Timoun nan (yo) ap avèk _____:
Non

☐ **Weekends:** ☐ every ☐ every other ☐ other: (specify) _____ from _____ to _____.

Wikenn: chak chak lòt lòt: (presize) _____ soti nan _____ pou rive _____.

☐ **Weekdays:** (specify days) _____ from _____ to _____.

Jou lasemèn: (presize jou) _____ soti nan _____ pou rive _____.

☐ **Other:** (describe) _____
Lòt: (dekri) _____

☐ See attached calendar for regular schedule.

Gade kalandriye ki tache pou orè regilye.

☐ There is a different parenting time schedule for the following child(ren):

Gen yon orè diferan tan paran pou timoun ki anba a (yo):

Holiday schedule- How will holidays be defined? Add special events or occasions important to your family.

Orè jou ferye- ki jan yo pral define jou ferye yo? Ajoute evènman espesyal oswa okazyon enpòtan nan fanmi ou.

(choose one)

(chwazi yonn)

☐ No holiday parenting time will apply. The regular weekday and weekend schedule above will apply.

Pa gen tan paran jou ferye ki pral aplike. Orè regilye nan lasemèn ak fen semèn pi wo a pral aplike.

☐ Holiday parenting time will be as we agree.

Tan paran jou ferye yo pral jan nou dakò.

☐ Holiday parenting time will follow the schedule below. It will take priority over the regular weekday, weekend, and summer schedules.

Tan paran jou ferye ap swiv orè ki anba a. Li pral pran priyorite sou jou lasemèn regilye a, fen semèn, ak orè ete yo.

Fill in the blanks with your names to indicate where the child(ren) will be for the holidays. Provide the beginning and ending times. If a holiday is not specified as even, odd, or every year with one party, then the child(ren) will be with the party according to the regular schedule.

Ranpli espas vid yo ak non ou pou endike ki kote timoun nan (yo) pral ye pou jou ferye yo. Bay tan kòmansman ak finisman yo. Si yon jou ferye pa espesifye kòm pè, enpè, oswa chak ane ak yon sèl pati, Lè sa a, timoun nan (yo) pral ak pati a dapre orè a regilye.

The following is not a complete list of holidays. Add holidays that apply to your family (other school holidays, religious observances, Halloween, New Year's Eve/day, etc.)

Sa ki anba a se pa yon lis konplè jou ferye yo. Ajoute jou ferye ki aplike nan fanmi ou (lòt jou ferye lekòl la, obsèvasyon relijiye, Halloween, lavèy nouvèl ane a/jou, elatriye)

<u>Holidays</u> <u>Jou ferye</u>	<u>Even years</u> <u>Ane pè yo</u>	<u>Odd years</u> <u>Ane enpè yo</u>	<u>Every year</u> <u>Chak ane</u>	<u>Begin/end time</u> <u>Kòmanse/fen</u>
Mother's Day				
Fèt Manman				
Father's Day				
Fèt Papa				
Martin Luther King Day				
Jou Martin Luther King				
President's Day				
Jou PRezidan				
Memorial Day				
Jou Memoryal				
Juneteenth				
Juneteenth				
Fourth of July				
Fourth of July				
Labor Day				
Jou Travay				
Columbus Day				
Jou Columbus				
Thanksgiving				
Aksyon de Gras				
Veteran's Day				
Jou Veteran				
Child(ren)'s Birthdays				
Anivèsè nesans timoun (yo)				
Religious holidays (list):				
Jou ferye relijye (Lis):				
Other (list):				
Lòt (Lis):				

Winter, spring, and summer breaks are times when the child(ren) are out of school and you can determine how those out-of-school times, including weekends, will be shared between you.

Sezon ivè, sezon prentan, ak ete yo se moman lè timoun nan (yo) soti nan lekòl la epi ou ka detèmine ki jan moman andeyò lekòl la, ki gen ladan wikenn, yo pral pataje ant ou.

Winter break-

Vakans nan ivè-

(choose one)

(chwazi yonn)

☐ We will follow the regular weekday and weekend schedule.

Nou pral swiv orè regilye lasemèn ak wikenn lan.

- ☐ We will alternate winter breaks. The child(ren) will stay with _____ Name
in ☐ odd-numbered years ☐ even-numbered years, and with _____ Name
in ☐ odd-numbered years ☐ even-numbered years.

Nou pral altène vakans ivè yo. Timoun nan (yo) pral rete avèk _____ Non
nan nonb ane enpè yo nonb ane pè, epi ak _____ nan nonb ane enpè yo nonb ane pè.
Non

If a holiday designated above doesn't fall within a party's winter break time, the holiday schedule will take precedent.

Si yon jou ferye ki deziyen pi wo a pa tonbe nan tan vakans ivè yon pati, orè a jou ferye pral nan jou presedan an..

- ☐ We will divide winter break as follows:

Nou pral divize vakans ivè a jan sa a:

Spring break-

Vakans Prentan-

(choose one)

(chwazi yonn)

- ☐ We will follow the regular weekday and weekend schedule.
Nou pral swiv orè regilye lasemèn ak wikenn lan.
- ☐ We will alternate spring breaks. The child(ren) will stay with _____ Name
in ☐ odd-numbered years ☐ even-numbered years, and with _____ Name
in ☐ odd-numbered years ☐ even-numbered years.

Nou pral altène vakans prentan yo. Timoun nan (yo) pral rete avèk _____ Non
nan nonb ane enpè yo nonb ane ppè, epi ak _____ nan nonb ane enpè yo nonb ane ppè.
Non

If a holiday designated above doesn't fall within a party's spring break time, the holiday schedule will take precedent.

Si yon jou ferye ki deziyen pi wo a pa tonbe nan tan vakans prentan yon pati, orè a jou ferye pral nan jou presedan an.

- ☐ We will divide spring break as follows:

Nou pral divize vakans prentan an jan sa a:

Summer break-

Vakans Ete-

(choose one)

(chwazi yonn)

- ☐ We will follow the regular weekday and weekend schedule.
Nou pral swiv orè regilye lasemèn ak wikenn lan.
- ☐ Each of us will have _____ weeks with the child(ren) during the summer. These weeks may
be ☐ consecutive ☐ non-consecutive and start and end on _____. We will
request the week(s) by _____ of each year. If there is a conflict,
Date

_____ will get first pick of the date in odd-numbered years and
Name _____
_____ will get first pick of the date in even-numbered years.
Name _____

Chak nan nou pral _____ gen kèk semèn ak timoun nan (yo) pandan ete a. Semèn sa yo
ka youn apre lòt ki pa konsekitif epi yo kòmanse epi fini nan _____. Nou pral
Jou nan semèn
mande semèn nan (yo) disi _____ nan chak ane. Si gen yon konfli,
Dat
_____ pral jwenn premye chwa dat la nan ane enpè yo ak
Non
_____ pral jwenn premye chwa dat la nan ane pè yo.
Non

- ☐ We will divide summer break as follows:
Nou pral divize vakans ete a jan sa a:

Out-of-state travel-

Vwayaj andeyò eta a

(choose all that apply)

(Tcheke tout sa ki aplike)

- ☐ Each of us may travel within the United States with the child(ren) during our parenting time/vacation. The party traveling with the child(ren) will give the other party/parties at least _____ days written notice before traveling out-of-state unless there is an emergency, and will include an itinerary, with locations and telephone numbers where the child(ren) and that party can be reached.
Chak nan nou ka vwayaje nan Etazini ak timoun nan (yo) pandan tan paran nou/vakans. Pati ki ap vwayaje ak timoun nan (yo) pral bay lòt pati a/pati yo omwen _____ jou avi alekri anvan li vwayaje andeyò eta a sòf si gen yon ijans, epi yo pral gen ladan yon itinerè, ak kote ak nimewo telefòn kote timoun nan (yo) ak pati sa a ka rive.
- ☐ Each of us may travel out of the country with the child(ren) during our parenting time/vacation. The party traveling with the child(ren) will give the other party/parties at least _____ days written notice before traveling out of the country and will include an itinerary, with locations and telephone numbers where the child(ren) and that party can be reached. We agree to provide documentation necessary for the other party/parties to take the child(ren) out of the country.
Chak nan nou ka vwayaje andeyò peyi a ak timoun nan (yo) pandan tan paran nou/vakans. Pati ki ap vwayaje ak timoun nan (yo) pral bay lòt pati a/pati yo omwen _____ jou avi alekri anvan li vwayaje andeyò peyi a sòf si gen yon ijans, epi yo pral gen ladan yon itinerè, ak kote ak nimewo telefòn kote timoun nan (yo) ak pati sa a ka rive. Nou dakò bay dokiman ki nesèsè pou lòt pati a/pati yo pran timoun nan (yo) soti nan peyi a.
- ☐ Other: _____
Lòt: _____

3. TRANSPORTATION AND EXCHANGE OF CHILD(REN)

TRANSPÒ AK ECHANJ TIMOUN (YO)

Transportation-

Transpò-

(choose one)

(chwazi yonn)

- ☐ The party beginning their parenting time will provide transportation for the child(ren).

Pati ki kòmanse tan paran li a ap bay transpò pou timoun nan (yo).

- ☐ The party ending their parenting time will provide transportation for the child(ren).

Pati ki fini tan paran li a ap bay transpò pou timoun nan (yo).

- ☐ _____ will provide all transportation.

Name

_____ pral bay tout transpò.

Non

- ☐ Other: _____

Lòt: _____

Exchanges of the child(ren)-

Echanj timoun nan (yo)-

Each of us will have the child(ren) ready and on time with proper clothing, medications, homework, extracurricular activity uniforms or equipment, etc., at the time of exchange. The receiving party will be notified if the child(ren) took any medications within 24 hours of the transition.

Chak nan nou pral prepare timoun nan (yo) nan tan ak rad apwopriye, medikaman, devwa, inifòm aktivite ekstraskolè oswa ekipman, elatriye, nan moman echanj lan. Pati k ap resevwa a pral avize si timoun nan (yo) te pran nenpòt medikaman nan lespas 24 èdtan apre tranzisyon an.

(choose one)

(chwazi yonn)

- ☐ Exchanges will be at each party's home

Echanj yo pral fèt nan kay chak pati yo

- ☐ Exchanges will occur at _____ unless we agree in advance to a different meeting place.

Echanj yo pral rive nan _____ sof si nou dakò davans nan yon andwa rankont diferan.

- ☐ Other: _____

Lòt: _____

4. COMMUNICATION BETWEEN PARENTS AND CHILD(REN)

KOMINIKASYON ANT PARAN AK TIMOUN NAN (YO)

Each of us will keep contact information current.

Chak nan nou ap kenbe enfòmasyon kontak aktyèl.

The child(ren) may have ☐ telephone ☐ e-mail ☐ other electronic communication in the form of _____

with the other party/parties: (choose one)

Timoun nan (yo) ka gen telefòn Imèl lòt kominikasyon elektwonik nan fòm _____

ak lòt pati a/pati yo: (Chwazi youn)

- ☐ Anytime

Nenpòt ki lè

- ☐ Every day during the hours of _____ to _____

Chak jou pandan èdtan _____ pou rive _____

☐ On the following days: _____ during the hours of _____ to _____

Nan jou sa yo: _____ pandan èdtan
_____ pou rive _____

☐ Other: _____
Lòt: _____

5. CHILD CARE

SWEN TIMOUN

(choose all that apply)

(Tcheke tout sa ki aplike)

- ☐ Each of us may select child care providers.
Chak nan nou ka chwazi founisè swen pou timoun.
- ☐ We must agree on child care providers.
Nou dwe dakò sou founisè swen pou timoun.
- ☐ Each of us must offer the other party/parties the opportunity to care for the child(ren) before using a child care provider for any period exceeding _____ hours.
Chak nan nou dwe ofri lòt pati a/pati yo opòtinite pou yo pran swen timoun nan (yo) anvan nou sèvi ak yon founisè swen pou timoun pou nenpòt ki peryòd _____ èdtan depase.
- ☐ Other: _____
Lòt: _____

6. DISPUTES

DISKISYON

How will you resolve disputes relating to the parenting plan?

Kijan ou pral rezoud diskisyon ki gen rapò ak plan paran an?

(select one)

(chwazi yonn)

- ☐ We agree to attend at least _____ mediation session(s) before asking the court to intervene.
Nou dakò pou patisipe nan omwen _____ sesyon medyasyon (yo) anvan nou mande tribinal la entèvni.
- ☐ Other: (describe) _____
Lòt: (dekri) _____

7. OTHER ISSUES

LÒT PWOBLEM

For example, the child(ren)'s name(s), names used to refer to step-parents or other adults, circumstances requiring parental consent (driving, marriage, military service, employment, etc.), restrictions on what the child(ren) are exposed to (entertainment, firearms, all-terrain vehicles, etc.), and discipline.

Pa egzanp, non timoun nan (yo), non yo itilize pou fè referans a etap-paran yo oswa lòt granmoun, sikonstans ki mande konsantman paran yo (kondwi, maryaj, sèvis militè, travay, elatriye), restriksyon sou sa ke timoun nan (yo) ekspozè avèk (amizman, zam afe, machin tout-tèren, elatriye), ak disiplin.

NOTE: You have the right to consult with a lawyer to review this document before you sign it.

REMAK: Ou gen dwa konsilte avèk yon avoka pou revize dokiman sa a anvan ou siyen li.

I/We enter this parenting plan voluntarily. I/We believe this plan is in the best interest of the child(ren) at this time.

I am/We are satisfied with this plan and intend to be bound by it.

Mwen/nou antre nan plan paran sa a volontèman. Mwen/nou kwè plan sa a se nan pi bon enterè timoun nan (yo) nan moman sa a. Mwen/nou satisfè ak plan sa a ak gen entansyon pou rete ladan li.

Date Dat	Date Dat
Signature Siyati	Signature Siyati
Printed Name Non an lèt detache	Printed Name Non an lèt detache
Street Address Adrès Lari	Street Address Adrès Lari
City, State, Zip Vil, Eta, Kòd Postal	City, State, Zip Vil, Eta, Kòd Postal
Telephone Number Nimewo Telefòn	Telephone Number Nimewo Telefòn
E-mail Imèl	Fax Faks

Date Dat	
Signature Siyati	
Printed Name Non an lèt detache	
Street Address Adrès lari	
City, State, Zip Vil, Eta, Kòd Postal	
Telephone Number Nimewo telefòn	
E-mail Imèl	Fax Faks