Case Number: Case Name:

Declaration Regarding Custody And Visitation Attachment To OSC

1.	. Background (fill in, or check, each of the following that apply)							
		I have lived with the other parent and our children from to . The other parent and I have not been together since The other parent and I were: married never married. I currently live in, or near (City and State, if not CA) The other parent currently lives in, or near (City and State, if not CA)						
2.	How the Children Currently Spend Time with You and the Other Parent (Parenting or Timeshare Plan A. Describe when your children spend time with you and when your children spend time with the other parent.							
		Time with you:						
		Time with the other parent:						
		i) How long has this plan been in place?						
		ii) What about this plan is helpful for your children?						
		iii) What about this plan is difficult for your children?						
	В.	How do your children deal with going back and forth between you and the other parent ("exchange")?						
		i) What do you think would help your children feel more comfortable with these exchanges?						
3.	Inf	formation About Your Children						
	A.	What activities do your children enjoy?						
	В.	What activities do your children enjoy doing with you?						
	C.	What activities do your children enjoy doing with the other parent?						
	D.	If you have a child who has any special medical, educational or emotional needs, please describe them:						

Case Number: Case Name:

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6.

- A. Your children's schedule for school and childcare (if children have different schedules, please be sure to write them down separately):
- B. Your children's schedules for other activities (if children have different schedules, please be sure to write them down separately):
- C. Your work and/or daily schedule:
- D. The other parent's work and/or daily schedule, if you know it:

D.	The other parent's work and/or daily schedule, if you know it:				
Co	ommunication Between You and the Other Parent				
A.	How well do you and the other parent work together on behalf of your children? ☐ Very Well ☐ OK ☐ Not Very Well ☐ Terribly ☐ We can't talk with each other at all				
В.	When you disagree, how do the two of you usually talk or act with each other?				
C.	How do you usually resolve your disagreements?				
D.	. Are you able to discuss issues like where your children should go to school, what doctor to see and what religious upbringing, if any, your children should have? Yes No If no, why not?				
E.	Was there a time when you and the other parent were better at working together in making decisions for your children? \square Yes \square No If yes,				
	i) How did that work?				
	ii) Do you think you could do that again? Yes No If no, why not?				
F.	How do you think your children are affected by the way you and the other parent behave with each other?				
Сс	ounseling Needs:				
Do	you think that any of the following would be helpful to your children?				
	Co-parenting (learning better communication) counseling for you and the other parent				
	Individual counseling for any of the children • Indicate which child, or children				
	Individual counseling for either, or both, parents • Indicate which parent				
	Family counseling				

Case Number: Case Name:

7.			down TWO different ways you and the last to the last t	ne other parent can share time with your children. What o be acceptable to the other parent?
		i)	Why do you think this plan would be	e helpful to your children?
	B.			
		i)	Why do you think this plan would be	e helpful to your children?
8.	Oth	er	Information that might be helpful to t	he court in understanding my children's needs:
l d	ecla	re :	under penalty of perjury under the la	ws of the State of California that the foregoing is true
an	d co	rre	ect to the best of my knowledge and b	pelief.
Da	ate: _			
Na	ame_			
				Mother Father Other