

You must use black ink to fill out this form.

Your Name: _____

Mailing Address: _____

Telephone: _____ Message phone: _____

NOTE: If for any reason you do not wish the other party to know your physical address, you still must provide a mailing address so that the court and the other party can serve you by mail.

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA

AT _____
City or Town where the Court is located

Plaintiff,
v. _____
Defendant.

Your Case No. _____

**PLAN
FOR CUSTODY AND VISITATION IN SUPPORT OF**

- COMPLAINT
- ANSWER
- MOTION
- TRIAL/SETTLEMENT BRIEF
- OTHER _____
- OPPOSITION FOR _____

I, _____, propose the following custody and visitation plan because it is in our child(ren)'s best interest/s.
(Print your name here)

1. Who is included

The following child(ren) is/are included in this plan (The child(ren) listed here must have the same schedule; make a different plan for any child(ren) with a different schedule.)

Name	Date of Birth

Additional plans are attached for other child(ren) _____.

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2. Legal Custody: *decision making (choose one)*

Joint legal custody: We can communicate and make joint decisions regarding our child(ren)'s major medical, educational, legal and religious needs.

Sole legal custody: Most of the time, we cannot communicate and make joint decisions regarding our child(ren), therefore sole legal custody should be with Father Mother.

3. Physical Custody: *where children live (choose one)*

Shared Physical Custody: We can communicate and coordinate with each other to provide for our child(ren)'s physical care on a day-to-day basis. The schedule below should be the shared physical custody schedule for our child(ren).

Primary Physical Custody: Our child(ren)'s needs can best be met by primary physical custody being with Father Mother and the child(ren) spending time with the other parent according to the schedule below.

Other Custody Arrangement as follows: _____

4. Are your children old enough to go to school?

Yes. (*Skip A. and go to B.*) **No.** (*Answer A. and B.*)

A. Schedule before child(ren) is(are) old enough to go to school

Before reaching school age, the child(ren) should reside with Father Mother, except for the following days and times when the child(ren) should reside with or be with the other parent:

i. from: _____ to _____
(Day and time) (Day and Time)

other: _____

Frequency:

every week every other week every two weeks _____

ii. and from: _____ to _____
(Day and time) (Day and Time)

You must use black ink to fill out this form.

other: _____

Frequency:

every week every other week every two weeks _____

B. Schedule after child(ren) is (are) old enough to go to school

After reaching school age, the child(ren) should reside with Father
 Mother, except for the following days and times when the child(ren) should
reside with or be with the other parent:

i. from: _____ to _____
(Day and time) (Day and Time)

other: _____

Frequency:

every week every other week every two weeks _____

ii. and from: _____ to _____
(Day and time) (Day and Time)

other: _____

Frequency:

every week every other week every two weeks _____

5. Place for transfer between parents

The transfer of the child(ren) between parents should take place at the following
location(s): _____

6. Transportation for transfer between parents

Dad Mom Both Other _____
(Name of person who will be helping)

should be responsible for transporting the child(ren).

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Comments: _____

7. Third party assistance with transfer between parents

I do not propose assistance with the transfer.

I propose the following third party(ies) to conduct or supervise the transfer:

Name	Phone	Conduct	Supervise
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

8. Safety Concerns

I am I am not concerned about my safety or the safety of the child(ren)

when with the other parent. If there are concerns, I propose the following restrictions:

9. Out-of-state travel

(Choose A or B)

A. Father and/or Mother may not travel out-of-state with our child(ren) during his or her custody or visitation time.

B. Father and/or Mother may travel out-of-state with our child(ren) during his or her custody or visitation time without restrictions with the following restrictions:

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10. Vacation, holiday, birthday and special occasion schedule

There should be no change in the **regular schedule (see pages 2-3) during** vacations and holidays unless specifically indicated below. *(Specify whether time will be shared, or with a particular parent in odd, even or every year.)*

	<u>With Dad</u>	<u>With Mom</u>	<u>Date/time begin and end</u>
Winter vacation	_____	_____	_____
Spring vacation	_____	_____	_____
Summer vacation	_____	_____	_____
Christmas Eve	_____	_____	_____
Christmas Day	_____	_____	_____
Father's birthday	_____	_____	_____
Mother's birthday	_____	_____	_____
Child(ren)'s birthday(s)	_____	_____	_____
Father's Day	_____	_____	_____
Mother's Day	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

11. Other: _____

_____ more pages are attached and incorporated by reference.
of pages attached

Date

Your Signature (In blue ink if possible)

I certify that on _____ a copy of this *Custody and Visitation Plan* was mailed by first class or hand delivered to:

Opposing Party _____
 CSSD/AG CI Other _____

Opposing Lawyer _____
Your signature: _____