

Parenting Plan

PARENTS

Petitioner, hereinafter referred to in this Parenting Plan as Parent

Full Name:

Address:

Telephone Number: _____ E-Mail: _____

Respondent, hereinafter referred to in this Parenting Plan as Parent.

Full Name:

Address:

Telephone Number: _____ E-Mail: _____

CHILDREN: This parenting plan is for the following child(ren) born to, or adopted by the parties:

Full Name: _____ Date of Birth: _____

☐ Shared Parental Responsibility with Decision Making Authority: It is in the best interests of the child(ren) that the parents confer and attempt to agree on the major decisions involving the child(ren). If the parents are unable to agree, the authority for making major decisions regarding the child(ren) shall be as follows:

Education/Academic decisions Parent _____

Non-emergency health care Parent _____

Other: {Specify} _____ Parent _____

OR

☐ Sole Parental Responsibility: It is in the best interests of the child(ren) that Parent {name or designation} _____ shall have sole authority to make major decisions for the child(ren.) It is detrimental to the child(ren) to have shared parental responsibility.

COMMUNICATION: Between Parents All communications regarding the child(ren) shall be between the parents. The parents shall not use the child(ren) as messengers to convey information, ask questions, or set up schedule changes.

The parents shall communicate with each other: {Indicate all that apply}

_____ in person

_____ by telephone

_____ by letter

_____ by e-mail

_____ Other: {Specify} _____

Other Provisions: _____

I certify that I have been open and honest in entering into this Parenting Plan. I am satisfied with this Plan and intend to be bound by it.

<p>Dated: _____</p> <p>Signature of Petitioner/Parent: _____</p> <p>Printed Name: _____</p> <p>Address: _____</p> <p>City, State, Zip: _____</p> <p>Telephone Number: _____</p> <p>Email: _____</p>	<p>Dated: _____</p> <p>Signature of Respondent/Parent: _____</p> <p>Printed Name: _____</p> <p>Address: _____</p> <p>City, State, Zip: _____</p> <p>Telephone Number: _____</p> <p>Email: _____</p>
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Time-Sharing Schedule						
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31	1	2	3	4

Other Special Schedule Provisions



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