PARENTING PLAN DECISIONS CHECKLIST

I. Who sha	Who shall have PHYSICAL custody of the child(ren)? Who will be designated as the residential parent for school district purposes?						
Who wil							
purpose							
F							
Name(s	Name(s), birthdate(s) and SSN's of minor child(ren):						
							
·							
Explain your c	ustody/visit	ation plan:					
Α. Ι	Major balida	w cobodulo:					
A. I	viajoi riolida	y schedule:					
New Ye	ar's Eve:	-					
		Odd years with	from	until			
New Ye	ear's Day:	Even years with	from	until			
		Odd years with					
Passov	٠ ۵۲ ٠	Even years with	from	until			
1 23300	GI.	Odd years with					
Easter:		Even years with	from	until			
		Odd years with	from	until			
Memori	al Day:	Even years with					
		Odd years with	from	until			
July 4t	h:	Even years with	from	until			
July 41	11.	Odd years with					

	Labor Day:		Even years with	fro	om	_until	_
	•		Odd years with	fre	om	until	_
			·				
	Halloween:		Even years with				
			Odd years with	fr	om	until	
						4!!	
	Thanksgivin	ıg:	Even years with				
			Odd years with		om	unui	-
	Hanukkah:		Even years with	fr	om	until	
	rianaman.		Odd years with				
			oud jours mar	''	<u> </u>		_
	Christmas B	≣ve:	Even years with	fr	om	until	
			Odd years with				
		•					
	Christmas I	Day:	Even years with _	fr	om	until	
	÷		Odd years with	fr	om	until	_
В.	Sahaal hali	dava br	eaks, & vacation sch	andula:			
D.	SCHOOL HOM	uays, bir	eaks, a vacation sci	iedule.			
	1. 8	Sprina bi	eak:				
						·	
							_
	2. (Christma	s/Semester break: _				_
		···-					
	3. Summer Vacation:						
	o. c	Julianel	Yavanon.				
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C.	Other Special Days:				
		1. Child(ren)'s birthdays:			
		2. Mother's Day:			
		3. Father's Day:			
	D.	Weekday & Weekend plan:			
	E.	Time & place of transfer of child(ren) (Mom's house, Dad's house, school, half-way point?):			
	F.	Transportation plan (Who is responsible for picking up/returning child(ren) when change of physical custody occurs?):			
	G.	Telephone Access (How often can parent call child(ren)?):			
	H.	Procedure for changing the visitation schedule:			
II.	Who :	shall have LEGAL Custody of the child(ren)?:			
	Α.	Who will make educational decisions?:			
	В.	Who will make Medical/Dental/Health care decisions?:			

	C.		will determine which extracurricular activities the child(ren) participate in?:		
	D.	Who	will select any child care providers?:		
	E.	recei	ch parent willing to notify the other of any information ived from school, including school functions, etc., and how will communication take place?:		
	F.	willin	u cannot agree upon a particular parenting issue, are you ag to use a Dispute Resolution Procedure (ie: mediation) before eeding to court?:		
11.	Child	ld Support			
	A.	Will a	any child support be paid?:		
	If so:	1.	Who will be receiving the child support?:		
		2.	How much?		
		3.	What day of the month will it be due?		
		4.	How paid? (automatic wage withholding or directly to court clerk or directly to spouse?)		
	В.	Who	Who will carry medical insurance on the child(ren)?:		
		Who	will pay for costs not covered by medical insurance?		
					

C.	Educational Expenses:		
	1. Will any child(ren) be attending private school?		
If so:	How will this expense be paid?		
	2. Do you want to commit yourselves to paying for college for any child(ren)?:		
if so:	How will this expense be paid?		
	3. If you commit to paying for college, you must fill out the attached "College Cost Language Form".		
D.	Extraordinary Expenses:		
	1. Who will pay for extracurricular or sport activities? (ie: baseball, soccer, football, gymnastics, scouts, music, dance, camp, etc)		
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E	Who will pay for child care?		
F.	Who will pay for transportation expenses, if necessary?		

COLLEGE COST LANGUAGE: