

IN RE:

The Marriage / Children Of:

Civil Action No. \_\_\_\_\_

\_\_\_\_\_, and \_\_\_\_\_  
Petitioner (First/Middle/Last) Respondent (First/Middle/Last)

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**WORKSHEET FOR INDIVIDUAL PROPOSED PARENTING PLAN**

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This Worksheet completed by: \_\_\_\_\_ Date: \_\_\_\_\_  
(Print your name.)

**PARENTING RESPONSIBILITIES**

Complete the following list which shows how you and the other parent have shared parenting responsibilities in the last twenty-four months before your case was filed. Do not provide information for any time after the filing of the case. For each responsibility, the blanks should always add up to 100 percent.

This list is for the children named: \_\_\_\_\_.

**(A) Daily Physical Needs and Care**

Examples: feeding, bedtime and wake-up routines; care when child is sick or hurt; bathing, grooming, personal hygiene, and dressing; recreation and play; physical safety; transportation.

Petitioner \_\_\_\_\_ % Respondent \_\_\_\_\_ %

**(B) Developmental Needs**

Examples: learning to walk, talk and use eating utensils; toilet training; development of self-confidence and maturity.

Petitioner \_\_\_\_\_ % Respondent \_\_\_\_\_ %

**(C) Development of Proper Behavior**

Examples: discipline, instruction in manners; assignment and supervision of chores.

Petitioner \_\_\_\_\_ % Respondent \_\_\_\_\_ %

**(D) Educational Matters**

Examples: making school arrangements; communicating with teachers and counselors; supervision of homework; monitoring grades and discussing school related matters.

Petitioner \_\_\_\_\_ % Respondent \_\_\_\_\_ %

**(E) Development of Social Skills**

Examples: teaching the child how to develop proper personal relationships with friends, brothers and sisters, and adults.

Petitioner \_\_\_\_\_ % Respondent \_\_\_\_\_ %

**(F) Health Care**

Examples: making arrangements and appointments for health care; accompanying child to doctor's and dentist's appointments; discussing child's health care needs with doctors, dentists, and other health care providers; providing care in the home when child is ill.

Petitioner \_\_\_\_\_ %      Respondent \_\_\_\_\_ %

**(G) Moral and Religious Matters**

Examples: discussing moral and religious matters with the child; providing moral and religious guidance; accompanying the child to church.

Petitioner \_\_\_\_\_ %      Respondent \_\_\_\_\_ %

**(H) Child Care Matters**

Examples: making arrangements for child care by family members, baby-sitters, or child care facilities; supervising and communicating with these child care providers.

Petitioner \_\_\_\_\_ %      Respondent \_\_\_\_\_ %

**MAKING MAJOR DECISIONS FOR THE CHILDREN**

Explain how you and the other parent have shared the responsibilities for making major decisions for the children. This information is for only the last twenty-four months before your case was filed. Do not provide information for any time after the filing of the case.

1. First, review the types of decisions in the list on the next page, then answer the following question.

Did you and the other parent always make the types of major decisions on the list by talking the decision over, and coming to an agreement on what the decision should be?

☐ YES   ☐ NO

If you answered "Yes," you don't need to complete the list; you're finished with this section. If you answered "No," read item 2.

2. Complete the list on the next page by indicating the percentage of time each type of decision was shared, which means you and the other parent talked the decision over and came to an agreement on the decision; or the percentage of time each type of decision was made by you or the other parent, alone, without talking it over. For each type of decision, the numbers in all of the blanks should always add up to 100 percent. In items (F) and (G), you may write in other types of major decisions, and complete those items just as you completed the first part of the list.

This list is for the children named: \_\_\_\_\_.

(A)	<b><u>Education</u></b>	Shared _____ %	Petitioner _____ %	Respondent _____ %
(B)	<b><u>Non-Emergency Health Care</u></b>	Shared _____ %	Petitioner _____ %	Respondent _____ %
(C)	<b><u>Religion</u></b>	Shared _____ %	Petitioner _____ %	Respondent _____ %
(D)	<b><u>Child Care</u></b>	Shared _____ %	Petitioner _____ %	Respondent _____ %
(E)	<b><u>School Related Activities</u></b>	Shared _____ %	Petitioner _____ %	Respondent _____ %
(F)	_____	Shared _____ %	Petitioner _____ %	Respondent _____ %
(G)	_____	Shared _____ %	Petitioner _____ %	Respondent _____ %

### **PARENTS' CURRENT WORK SCHEDULES**

List your current work schedule. Complete only the part on your work schedule.

#### **Petitioner's Work Schedule**

#### **Respondent's Work Schedule**

### **CHILDREN'S SCHOOL, AFTER SCHOOL, & SPORTS ACTIVITIES**

List your children's current school, after school activity, and sports schedules. School includes pre-school and kindergarten programs. Explain when and how the children go to school and other activities, and when and how they come home. (If you have filed an Affidavit To Withhold Identifying Information, then you do not have to list your children's school.)

☐ None of our children attend school, pre-school, or kindergarten.

This list is for the children named: \_\_\_\_\_.

### **CHILD CARE**

Explain the arrangements for child care currently provided to your children by persons other than the parents. Explain who provides child care, and explain the child care schedule. (If you have filed an Affidavit To Withhold Identifying Information, then you do not have to provide the name of the childcare provider.)

☐ None of our children receive child care from any person other than the parents.

This list is for the children named: \_\_\_\_\_.

### **OTHER INFORMATION**

Provide any other information you think the court should know concerning how you and the other parent take care of the children.

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### **VERIFICATION**

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I, \_\_\_\_\_, after making an oath or affirmation to tell the truth, say that the facts I have stated in this Proposed Parenting Plan Worksheet are true to the best of my personal knowledge and belief; and if I have provided information given to me by others, I believe that information to be true.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

This Verification was sworn to or affirmed before me on the \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Notary Public / Other Official

My commission expires: \_\_\_\_\_.