

Name _____
(Plaintiff's or defendant's name, address, and telephone number)

Address _____

Telephone _____

_____, *Pro Se*
(Plaintiff or defendant)

SUPERIOR COURT OF NEW JERSEY
CHANCERY DIVISION—FAMILY PART

(County where complaint is filed) COUNTY

DOCKET NO. FM _____
(Docket number of complaint)

Name: _____ Plaintiff vs. Name: _____ Defendant

CIVIL ACTION
**CUSTODY AND
PARENTING TIME/
VISITATION PLAN**
Pursuant to R. 5:8-5

I am the _____ in the above action. I submit this parenting
(Plaintiff or defendant)
plan in accordance with Rule 5:8-5.

1. Plaintiff resides at _____
(Plaintiff's address)

2. Defendant resides at _____
(Defendant's address)

3. Plaintiff is employed as _____
(Plaintiff's job title)

at _____
(Name and address of plaintiff's employer)

4. Defendant is employed as _____
(Defendant's job title)
at _____
(Name and address of defendant's employer)

_____.

5. _____ requests the following:
(Plaintiff or defendant)

(Check the applicable statement)

___ A. _____ shall be the parent of primary residence and
(Plaintiff or defendant)

_____ shall have visitation/parenting time.
(Plaintiff or defendant)

___ B. Plaintiff and defendant shall share joint physical/residential custody
of the minor child(ren).

___ C. Plaintiff and defendant shall share joint legal custody of the
minor child(ren).

___ D. _____ shall have primary legal and physical
(Plaintiff or defendant)
custody of the minor child(ren).

___ E. _____ shall not have physical or legal
(Plaintiff or defendant)
custody of the minor child(ren) and shall have only visitation/parenting time.

___ F. _____
(Other request pertaining to custody or visitation/parenting time)

_____.

6. _____ requests the following:
(Plaintiff or defendant)

(Check the applicable statements)

___ A. _____ shall have parenting time with the
(Plaintiff or defendant)
child(ren) every other weekend from _____ on _____
(Time of day) (Day of the week)

until _____ on _____. The _____
(Time of day) (Day of the week) (Plaintiff or defendant)

shall be responsible for picking the child(ren) up at _____

(Home of plaintiff, defendant, or other location)

____ B. _____ shall also have visitation with the child(ren)
(Plaintiff or defendant)
every week on _____ from _____
(Day of the week) (Start time)
until _____. The _____ shall be responsible
(End time) (Plaintiff or defendant)
for dropping the child(ren) off at _____
(Home of plaintiff, defendant, or other location)

____ C. _____ shall visit with the child(ren) on
(Plaintiff or defendant)
alternate holidays beginning with _____
(Name and date of holiday that visitation schedule begins)
_____, 20____. For the purposes of this

parenting time/visitation plan, the following is a list of holidays to be
celebrated by plaintiff or defendant and child(ren):

(List the holidays that plaintiff, defendant, and family celebrate)

____ D. _____ shall have the child(ren) for summer
(Plaintiff or defendant)
vacation for _____ each summer. This vacation shall be
(Number of days or weeks)

scheduled at the convenience of the children, taking into consideration school and extracurricular activity schedules.

7. Access to medical records and school records

(Check the applicable statement)

___ A. Both the plaintiff and defendant shall have access to the child(ren)'s school records.

___ B. Only the _____ shall have access to the child(ren)'s school records.
(Plaintiff or defendant)

___ C. Both the plaintiff and the defendant shall have access to the child(ren)'s medical records.

___ D. Only the _____ shall have access to the child(ren)'s medical records.
(Plaintiff or defendant)

___ E. The child(ren)'s physician shall contact either the plaintiff or the defendant to obtain consent necessary for any medical treatment, or procedures, or testing.

___ F. The child(ren)'s physician shall contact only the _____ to obtain consent necessary for any medical treatment, or procedures, or testing.
(Plaintiff or defendant)

8. Additional information

(Check the applicable statement)

___ A. _____ is planning to move to
(Plaintiff or defendant)

(Location to which you are relocating)

on or about _____
(Date of proposed move)

(Explain what impact this will have on the child[ren])

____ B. _____ will be changing jobs on or about
(Plaintiff or defendant)

(Date of proposed move)

(Explain what impact this will have on the child[ren])

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false, I am subject to punishment.

(Plaintiff's or defendant's signature) Plaintiff or Defendant, *Pro Se*

(Plaintiff's or defendant's name printed)

Dated _____
(Date on which this document is signed)