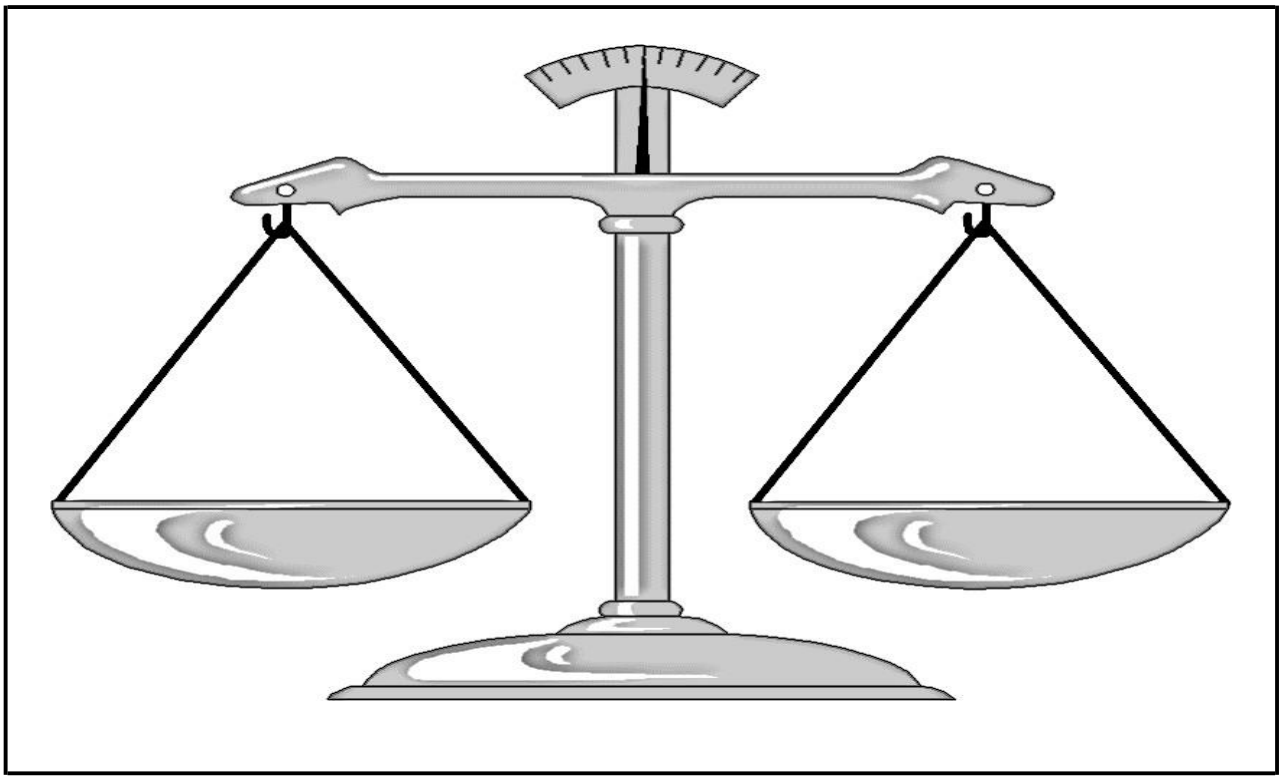


LYCOMING COUNTY
COMPLAINT FOR CUSTODY SELF-HELP KIT

REMEMBER

The law often changes. Each case is different. This self-help kit is meant to give you general information and not give you specific legal advice.

INTRODUCTION

This packet will help you file the forms to ask for different types of custody of your child or children. When you file for something "on your own" with no attorney representing you, it is called filing "pro se."

BEFORE YOU DECIDE TO FILE

Here are some points to consider before you decide whether to file for custody:

1. If there is already a Custody Order, you CANNOT use this packet. You must file a petition to modify that order using a Petition to Modify an Existing Order packet. You can do this pro se (on your own). All custody packets are available from the Law Library in the basement of the Courthouse; online at www.lyco.org under the "Courts/Law Library/Forms" tabs; or from North Penn Legal Services, 25 West Third St., Suite 400, Williamsport, PA 17701.

2. If you and the other parent are in agreement about custody, you can file a Stipulation that includes your agreement. After you file it, you will get a Court Order signed by a Judge that confirms your agreement. You can do this pro se (on your own). All custody packets are available from the Law Library in the basement of the Courthouse; online at www.lyco.org under the "Courts/Law Library/Forms" tabs; or from North Penn Legal Services, Penn Tower, 25 West Third St., Suite 400, Williamsport, PA 17701.

3. If the child or children live with you and the other parent doesn't spend much time with them, that may change if you decide to "go to Court." The other parent may surprise you by coming to Court and asking for more custody time than they have had. The Court will usually give both parents regular periods of custody, unless there is a Children and Youth recommendation or a psychologist's report that would restrict a parent's contact with the children. Even if there is a Protection From Abuse Order because one parent has abused the other, this will usually not restrict a parent's right to custody. Therefore, you may decide not to file for custody if things are satisfactory without an Order.

4. If you are *not* a parent of the child(ren), you may wish to read the self-help kit called "Standing: Who Can File for Custody?" All custody packets are available in the Law Library in the basement of the Courthouse; online at www.lyco.org under the "Courts/Law Library/Forms" tabs; or from North Penn Legal Services, Penn Tower, 25 West Third St., Suite 400, Williamsport, PA 17701.

CUSTODY TERMS

LEGAL CUSTODY	-	Means the right to make major decisions affecting the best interest of a minor child, including, but not limited to, medical, religious, and educational decisions.
SHARED LEGAL CUSTODY	-	Means the right of more than one individual to legal custody of the child.
SOLE LEGAL CUSTODY	-	Means the right of one individual to exclusive legal custody of the child.
PHYSICAL CUSTODY	-	Means the actual physical possession and control of a child.
PRIMARY PHYSICAL CUSTODY	-	Means the right to assume physical custody of the child for a majority of the time.
PARTIAL PHYSICAL CUSTODY	-	Means the right to take possession of a child away from the custodial parent for a certain period of time.
SHARED PHYSICAL CUSTODY	-	Means the right of more than one individual to assume physical custody of the child, each having significant periods of physical custodial time with the child.
SOLE PHYSICAL CUSTODY	-	Means the right of one individual to exclusive physical custody of the child.
SUPERVISED PHYSICAL CUSTODY	-	Means custodial time during which an agency or an adult designated by the Court, or agreed upon by the parties, monitors the interaction between the child and the individual with those rights.
PERSON ACTING AS A PARENT	-	A person other than a parent, including an institution, who has physical custody of a child and who has either been awarded custody by a court or claims a right to custody.
RELOCATION	-	Means a change in residence of the child which significantly impairs the ability of a non-relocating party to exercise custodial rights.

MYTHS AND REALITIES

MYTH: If a parent does not pay child support, the parent does not have a right to spend time with the child.

REALITY: Child support and custody rights are viewed as separate issues by the Court. A parent may not deny custody to the other parent because he/she is not paying child support. The court will not prevent a parent from seeing a child just because the parent has not made support payments.

MYTH: If the child is living with the mother, and the mother and father have never been married, the mother has legal custody of the child and the father cannot take the child without the mother's permission.

REALITY: Without a Court Order for custody, each parent has an equal right to have the child live with her/him and to make decisions about the child. A Custody Order spells out specific rights and responsibilities about physical custody and decision-making for the child. There are various types of custody. (Please see the definitions of custody terms immediately before this section.) Any custody agreement that is not a Court Order will not be enforced by the Court.

MYTH: The mother will always be given custody of a young child.

REALITY: All parties are equal before the Court, without regard to gender. The Court determines custody based on what is best for the child(ren). Generally, the Court considers it in a child's best interest to spend significant time with both parents.

MYTH: A Court Order for custody cannot be changed.

REALITY: A Custody Order may always be changed by the Court or by agreement of the parties. Either parent may file a petition to modify the Order at any time.

MYTH: If one parent has primary physical custody of the child, that parent will be able to limit contact with the other parent if they so desire.

REALITY: Even if one parent has primary physical custody, the other parent is granted partial physical custody rights, except in unusual circumstances. Although many custodial parents think the non-custodial parent may be denied contact "because he's always drunk and high," or "because she's living with another man," these reasons alone are not enough to stop a parent's right to be with her/his child. A parent's physical custody rights will only be limited if it can be shown that a parent's addiction, tendency to physical violence, emotional instability or other behavior will have a harmful effect on the child. Usually, professional evidence is needed to prove this. The Court may, however, place conditions upon a parent's right to spend time with the child, such as no drinking alcohol during custody time. If the Court has evidence that the non-custodial parent may harm the child or act improperly toward the child, the Court may require supervised visitation.

MYTH: A parent who has primary physical custody can move the child and change the child's school district.

REALITY: Pennsylvania law says that a parent cannot move a child a distance that will significantly impair the other parent's ability to exercise custody rights without the permission of the other parent or the Court. This applies whether or not you have a Custody Order. Plus, if the parents have an Order granting them shared legal custody, neither parent can change the child's school without the other parent's agreement or permission by the Court.

THE CUSTODY PROCESS

There are seven steps in the custody process. This packet provides the forms you need and guides you through these steps.

Step One: Read the instructions in this packet.

Step Two: Fill out the forms in this packet, and make copies.

Step Three: File the forms and copies at the Prothonotary's Office.

Step Four: Wait for the copies to be mailed to you with a date for the custody conference.

Step Five: Serve the documents on the other party.

Step Six: Attend the custody conference.

Step Seven: If you do not reach an agreement at the conference, go further in the court system.

CUSTODY COMPLAINT FLOW CHART

Complete all paperwork fully and turn it into the Prothonatary's Office. Be prepared to pay if you did NOT fill out the Proceed without Cost section of the packet.

Prothonatary's will time stamp paperwork and forward it to the Family Court Judge, where it will be reviewed to see if all information is completed and/or any addition documents are required.

Was your paperwork filled out correctly?

Yes

The packet will be mailed to you which contains the conference date and Judges Signature

Once you receive the packet back, you MUST serve the other party a copy of all paperwork

Prepare for and attend the custody conference

No

All papers will be returned to you and you must correct and refile

Was an agreement reached between all parties at the custody conference?

Yes

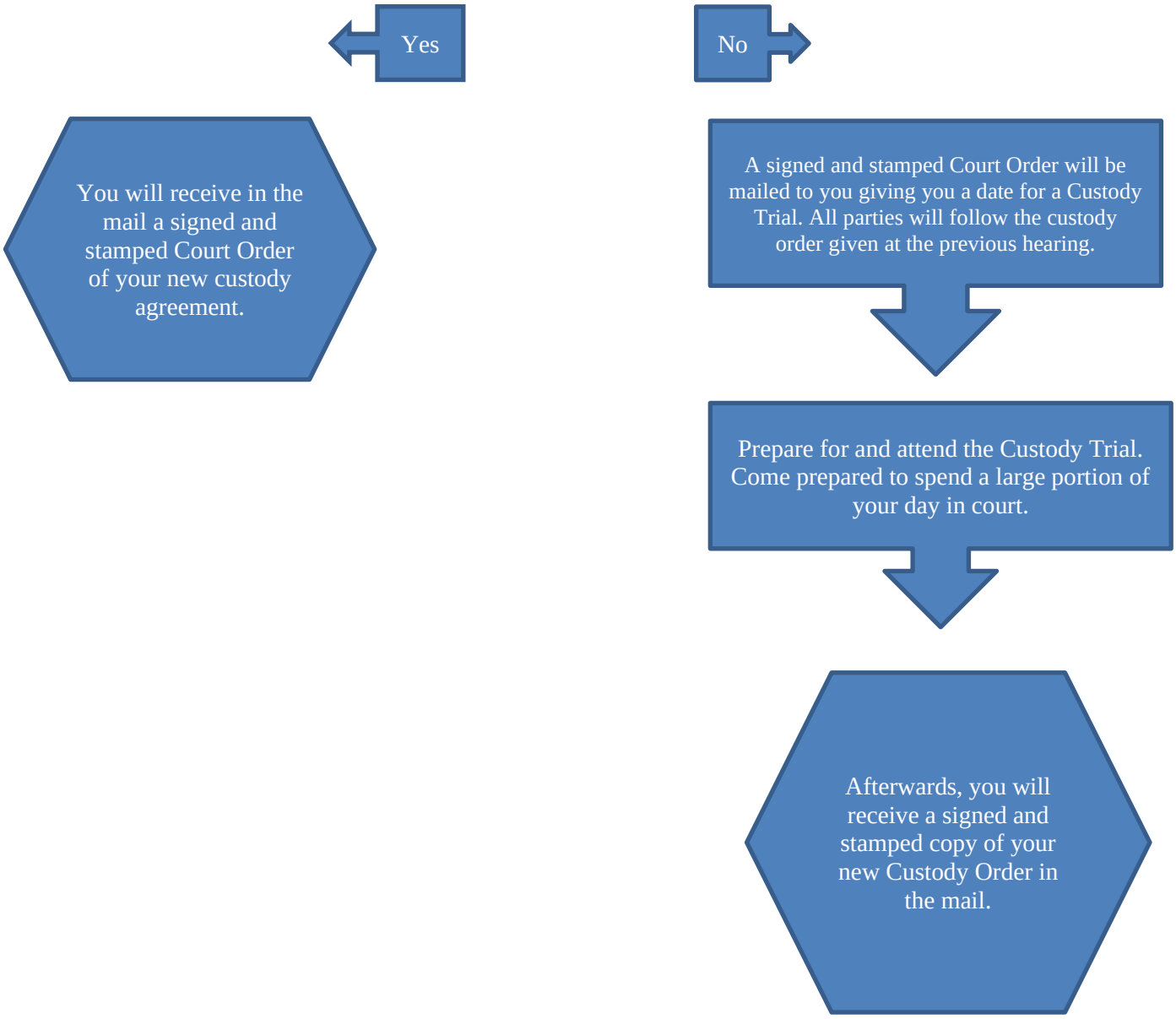
A signed and stamped copy of the order discussed at the conference will be mailed to you. This is your new court order to follow for custody.

No

A signed and stamped temporary custody order will be mailed to you. It will also include a date for a Custody Pre-Trial in front of a common pleas Judge

Prepare for and attend the Pre-Trial. Again an agreement will try and be reached between the parties.

Was an agreement reached between all parties at the Pre-Trial?



COMPLAINT FOR CUSTODY

PART ONE: INSTRUCTIONS

These are the instructions for filling out the forms. The forms are found in Part Two of this packet. You should separate the forms from the instructions now, so you can read the instructions for each form as you fill out that form.

1. <u>FIRST FORM – MOTION COVER SHEET</u>

Complete the caption (heading) by printing your name as the Plaintiff and the other party's name as the Defendant. Use middle initials and print neatly. Leave "Docket No." blank; the court will assign a number to your case. Note: If grandparents or other third parties have physical custody, there will be more than one Defendant, because both parents must always be parties.

Write your name on line 1, and "Complaint for Custody" on line 3. In box 4, put a check in front of "Court Conference." In box 6, write your name and address. Leave the rest of the form blank—this is for the Court to fill out.

2. <u>SECOND FORM – ORDER AND NOTICE with optional Notice to Incarcerated Defendant</u>

On the Order and Notice, complete the caption as on the Motion Cover Sheet. Print the Defendant's name on the blank after the word "You." Circle the word "obtain." Circle the type(s) of custody you are seeking. (See the "Custody Terms" section earlier in this packet.) Print the child or children's INITIALS on the second blank after the heading. Do not write the children's names, because that information is confidential and not available to the public. Do not do anything further on this sheet.

If the Defendant is incarcerated, also complete the Notice to Incarcerated Defendant (this form is two pages). On the first page, complete the caption as on the Motion Cover Sheet. Leave the rest of the form blank. Do not do anything on the second page.

3. <u>THIRD FORM – ENTRY OF APPEARANCE AS SELF-REPRESENTED PARTY</u>

Complete the caption as on the Motion Cover Sheet. Fill out the blanks in the form, and write the information requested. Skip paragraph 4 if you never had an attorney.

4. <u>FOURTH FORM – COMPLAINT FOR CUSTODY</u>

The caption should be completed as on the other forms. The numbers below match the numbers on the Complaint.

1. Print your name, address, and phone number.

2. Print the other party's name, address, and phone number. If there is more than one party, simply add additional phrases such as "Defendant <u>John Doe</u> is the <u>paternal/maternal grandparent.</u>"

3. Circle the words which show what type of custody you are asking for. You may circle one type of legal custody and one type of physical custody.

Then list the children you are seeking custody of, by writing their initials only (do not write their names), their ages, where they presently live and check yes or no to indicate whether they were born out of wedlock.

Next, indicate who the children currently live with and that person's address.

In the section asking where the children have lived during the past five years, start with the most recent place, in section (a) list the address, who lives in that home and the dates the children lived there, from the date they first lived there to the present. In section (b) list the next most recent place, etc. back to five years ago.

Finally, provide the information for both parents of the children, as indicated.

4. In this section, describe your relationship with the children (for example, "mother", "father", "grandmother", "aunt", "family friend", etc.).

   Then list the people who live with you and their relationship to you.

5. In this section, describe the defendant's relationship with the children (for example, "mother", "father", "grandmother", "aunt", "family friend", etc.).

   Then list the people who live with the defendant and their relationship to him or her.

6. Section 6 contains information about any prior or other pending custody actions. Be sure to attach previous Orders.

   The first part refers to any prior custody proceedings. Circle "has" or "has not", to indicate whether you have participated as a party or witness or in any other capacity, in other court proceedings concerning the custody of these children. If you have, write the county and docket number of the case on the blank line.

   The second part refers to any pending custody proceedings. Circle "has" or "has no" to indicate whether you have information of a pending custody proceeding concerning these children. If you do have such information, write the county and docket number of the case on the blank line.

   Finally, the third part refers to any other person who has had custody for a period of time in the past. If someone other than the Plaintiff or Defendant has had custody for a period of six months or more during the recent past, you should circle "knows" and give the name and address of that person on the blank line. **Also include this person's name and address when completing number 8, below.**

7. In this section, write on the blank lines the reasons the court should grant your request for custody.

8. If there is anyone who has custody or claims custody rights who is not named in

your complaint as a defendant, write their name(s) and address(es) on the blank lines, and also indicate the reason they claim to have custody rights. If there is no such person, leave this section blank. You will have to serve anyone named in this section with a copy of the petition and notice of the conference when you receive it.

9. Complete Section 9 only if you are ***not a parent***. Choose only one of the subsections and explain why you believe you should be granted the relief you request. Explanations of each subsection are on the next page. Read all of them before choosing one.

Choose **9(a)** if the child has lived with you or currently lives with you and you have acted as a parent to the child for a substantial period of time.

Choose **9(b)** if you are a grandparent and the child does not currently live with you and you want legal custody and/or primary or shared physical custody. You must show your relationship with the child began with the consent of a parent or under a court order, you are willing to assume responsibility for the child, and one of these three things is true: (1) the child has been determined to be "dependent" in a Children & Youth proceeding, (2) the child is substantially at risk due to parental abuse, neglect, drug or alcohol abuse, or incapacity, OR (3) the child lived with you for at least 12 months in a row and the parents took the child from your home less than 6 months ago.

Choose **9(c)** if you are not a grandparent and the child does not currently live with you and you want legal custody and/or primary or shared physical custody. You must show you have assumed or are willing to assume responsibility for the child, you have a sustained, substantial and sincere interest in the welfare of the child, and neither parent has any form of care and control of the child.

Choose **9(d)** if you are a grandparent or great-grandparent and are seeking partial physical custody or supervised physical custody of the child. You must show either (1) a parent of the child is deceased, (2) your relationship with the child began either with the consent of a parent of the child or under a court order and the parents of the child have commenced a proceeding for custody and do not agree as to whether the grandparents or great-grandparents should have custody, or (3) the child has resided with you for a period of at least 12 consecutive months (excluding brief temporary absences of the child from the home) and is removed from the home by the parents; an action must be filed within six months after the removal of the child from the home.

In the **"WHEREFORE"** statement, check the appropriate box stating what type(s) of custody you are asking for (see definitions of terms earlier in this packet).

Sign the petition and the Verification. You are subject to penalties if you include false information in the Complaint.

5. and 6. FIFTH AND SIXTH FORMS – CRIMINAL/ABUSE HISTORY VERIFICATION

There are two of these forms, one is to be completed by you, the Plaintiff, and the other is to be completed by the Defendant after he or she is served with a copy of this Complaint for Custody paperwork. On both forms, complete the caption as on previous forms. On the first of the two forms, write your name on the first line of the first paragraph. Check any boxes that are appropriate and fill out the required information. Sign, print, and date the final page. **Do not write anything on the other form other than completing the caption.** This is for the other party to fill out and file after you serve it on them.

7. SEVENTH FORM – CONFIDENTIAL INFORMATION FORM

This form is three pages long. This is the ONLY PLACE you list the names and birthdates of the children. This form will not be seen by the public.

Fill out the caption like you have done in the other documents. On the line that says "Court," write "Lycoming County."

On the third line, write "Complaint for Custody," where it asks for the title of the pleading, and write the date you are filing the Complaint.

For the rest of the first page, you only need to fill out the first column. You do not need to write anything for "full name of adult." Just list each child's initials, name, and date of birth separately, with the dotted line dividing each child's information. If there are more than two children, use the additional page.

After you have listed each child, sign the form that states, "I certify that this filing complies . . ." Write the date and print the additional information requested under your signature. This means that you promise you have not put the children's names or birthdates on the forms available to the public.

8. and 9. EIGHTH AND NINTH FORMS – FORMS TO WAIVE THE FILING FEE

In order to file a new custody action, there is a fee that must be paid to the Prothonotary.

If you don't think you can pay the filing fee, you may ask the Court to waive the cost. You will need to fill out and file two forms, in addition to the documents above. If you can afford to pay the filing fee, you will have to do so. The Court waives this cost only in cases where income is extremely low.

EIGHTH FORM – ORDER TO PROCEED WITHOUT PAYMENT OF FEES AND COSTS

Fill in the caption as on the other documents. There is nothing more for you to fill out on this document. If the Court grants the Petition, your custody action can proceed. If not, you will be notified and you will have to pay the costs in order to continue.

NINTH FORM – PETITION TO PROCEED WITHOUT PAYMENT OF FEES AND COSTS

Fill out the caption as on the other documents. The rest of the form is quite clear. You are asked to fill in facts about your personal finances. Be sure to include income from all sources, including government benefits like Public Assistance, unemployment compensation, and food stamps. Don't forget money your spouse receives, if you are married; from your parents if they help you; from friends or other family members; or from an Order for child support. Finally, identify all persons who depend on your income for support, including children who live with you. Do not list the children's names—only their initials and age.

If you do not provide sufficient information for the court to determine whether you are financially eligible to proceed without payment of fees and costs, your petition will be denied.

Sections 4 and 5 of this Petition are important. Be sure that you read these paragraphs. They require you to inform the Court of any improvement in your financial situation which might permit you to pay some or all of the costs at a later date. When you date and sign the Petition after paragraph 5, you are promising that the information you have filled in is true. There will be consequences if you make false statements.

You have now completed the forms necessary to request the Court to allow you to proceed without paying the costs.

COPIES

After you have completed forms one through seven, clip them together in order, with the Motion Cover Sheet on the front. You will then need to get copies made. You need a copy for yourself, one for the Defendant, and one for each additional Defendant, if there are any. The original will stay at court, in the Prothonotary's office.

If you are filing a request to proceed without paying costs, you will need to make one copy of those documents, too (forms eight and nine).

You are now ready to file all of the papers with the Prothonotary.

COPY FEES WILL NOT BE WAIVED and the cost of copies in the Office of the Prothonotary/ Clerk of Courts is $0.25 per page.

HOW TO FILE THE COMPLAINT

Take all of your completed forms (including the copies) to the Prothonotary's Office on the first floor of the Lycoming County Courthouse at 48 West Third Street, Williamsport, PA, on any weekday (Monday through Friday) between 8:30 a.m. and 5:00 p.m. Separate the papers into the three groups shown below, and put them in the order shown below. You MUST have the groups of documents listed under First Group and Second Group. If you are asking the Court to waive the filing fee, you should also have the documents listed under Third Group.

1. FIRST GROUP: (1) Motion Cover Sheet, (2) Order and Notice (include Notice to Incarcerated Defendant if applicable), (3) Entry of Appearance as Self-Represented Party, (4) Complaint for Custody, (5) Completed Criminal/Abuse History Verification, and (6) Blank Criminal/Abuse History Verification

You will need an original and at least two copies of all these forms.

2. SECOND GROUP: Confidential Information Form (2 pages if there are less than three children, 3 pages if there are three children or more).

You will need an original and at least two copies of all these forms.

3. THIRD GROUP: If you are asking to have the filing fee waived, you will need: (1) Order to Proceed Without Payment of Fees and Costs, and (2) Petition to Proceed without Payment of Fees and Costs.

You will need an original and one copy of each of these documents.

The Prothonotary will give the case a number and will file stamp all of the documents. The Prothonotary will keep all the forms. The case will be given a date for a Family Court Conference, and then the copies will be mailed back to you.

The original documents that you filled out become part of the permanent court record and remain in the Prothonotary's Office. Of the copies that are mailed back to you, keep one copy of each document for yourself.

You must then promptly serve one copy of the First Group (see above) and one copy of the Second Group (see above) of documents on the Defendant and any other parties. Go to the next set of instructions to find out how to serve the Defendant. You do not have to serve the Third Group of documents.

HOW TO SERVE THE OTHER PARTY

Service of the papers is **YOUR** responsibility. IT IS IMPORTANT TO SERVE THE OTHER PARTY AS SOON AS POSSIBLE. If you do not serve the other party in time for them to have reasonable notice and opportunity to prepare for the conference, the Court may reschedule the conference for a later date. **You must also serve any person named in Paragraph 8 of the Complaint.**

If you believe the other party will accept the papers by signing a form stating that they received them, you can simply hand them to the other party and have them sign the form. This form must then be filed in the Prothonotary's office within ten (10) days. If not, and you have the funds to do so, you can pay the Sheriff, Constable, or process server to serve the papers for you and to file an Affidavit of Service for you. If neither of these methods is an option for you, you will need to serve by one of the following three methods. You will then need to fill out an Affidavit of Service, and file the Affidavit of Service at the Prothonotary's Office.

CERTIFIED MAIL AND REGULAR MAIL:

To serve by this method, you must send all of the documents stated above by **certified mail, with return receipt requested and restricted delivery AND first class regular mail** to the Defendant's address. "Restricted delivery" means that the return receipt must be signed by the Defendant only. When you send the certified mail, you will be given a "sender's receipt" (a little white receipt). Keep this receipt to include with your proof of service. Also send the defendant a copy of the papers by regular mail. You should mail the documents to the Defendant as soon as possible after you receive them in the mail from the Prothonotary's Office. The Defendant should receive them ***at least ten (10) days before the conference date.***

Once the Defendant has signed the green receipt, indicating that he or she has received the documents, service is complete. You will have proof that service is complete when you receive the return receipt, which may be either the green receipt with the Defendant's signature on it or an electronic receipt. Even if the electronic receipt does not show the defendant's signature, as long as it acknowledges delivery to the defendant consistent with USPS policy, and the first class regular mail is not returned within fifteen (15) days, service will still be complete.

When you receive the return receipt, you must save it. It is to be included with your sender's receipt and attached to the Affidavit of Service.

If the certified mail is REFUSED by the Defendant, you will get the original envelope back from the Post Office with a notation that it was refused. If the first class regular mail is not returned within fifteen (15) days, service will be considered complete. You will attach this envelope to your Affidavit of Service.

If the certified mail is returned UNCLAIMED, service will need to be made another way, even if the regular mail is not returned.

PERSONAL SERVICE:

Anyone who is 18 years of age or older, who is not a party to the action or an employee or relative of a party to the action, may serve the papers. You cannot serve the papers yourself, and you cannot have anyone who is related to you or who works for you, serve the papers.

The person who serves the legal papers on the opposing party must do it in the manner required by law. The person can serve the papers:

(a) by handing a copy to the other party; or
(b) by handing a copy to an adult member of the family with whom the other party resides, at the defendant's residence; or
(c) by handing a copy of the papers to an adult person in charge of the residence at the time (example: babysitter, etc.), at the defendant's residence; or
(d) by handing a copy of the papers to the clerk or manager of the hotel, inn, apartment house, boarding house, or other place of lodging where the defendant resides; or
(e) by going to the other party's usual place of business and handing a copy to the other party's agent (one that acts for or representative of) or to the person in charge.

COMMERCIAL CARRIER AND REGULAR MAIL:

To serve by this method, you must send all of the documents stated above by **commercial carrier, restricted delivery, with return receipt requested AND first class regular mail** to the Defendant's address. "Restricted delivery" means that the package must be delivered to the Defendant's address only. The return receipt may be an electronic return receipt as long as it details the date of delivery, the delivery address and to whom the package was delivered. Save your sender's receipt to attach to the Affidavit of Service. Also send the defendant a copy of the papers by first class regular mail. You should send the documents to the Defendant as soon as possible after you receive them in the mail from the Prothonotary's Office. The Defendant should receive them ***at least ten (10) days before the conference date.***

Service is complete when the return receipt shows the defendant's signature indicating receipt of the commercial carrier's package, or even if the receipt does not show the defendant's signature, as long as it acknowledges delivery to the defendant's address consistent with the commercial carrier's policy, and the regular mail is not returned within fifteen (15) days.

When you receive the return receipt, you must save it. It is to be included with your sender's receipt and both are to be attached to the Affidavit of Service.

If the commercial carrier returns the package indicating that the defendant REFUSED delivery, service will still be considered complete if the regular mail is not returned within fifteen (15) days.

If the commercial carrier returns the package indicating that the package was UNLAIMED, service will need to be made another way, even if the regular mail is not returned.

Forms 10 and 11: AFFIDAVITS OF SERVICE: Unless you pay a Sheriff or Constable to serve the defendant, or the defendant signs an Acceptance of Service form, choose ONE of the two Affidavit of Service forms that follow these instructions. There is one for service by certified mail or commercial carrier and regular mail, and one for personal service. If more than one person is being served, you have to file a separate Affidavit for each one.

The Affidavit of Service should be completed and filed with the Prothonotary within ten (10) days after service is completed. Make a copy for yourself, and bring it to the custody conference.

TENTH FORM – AFFIDAVIT OF SERVICE BY CERTIFIED MAIL OR COMMERCIAL CARRIER AND REGULAR MAIL – you will complete this form yourself.

Fill in the caption.
Fill in the blanks.
Staple your sender's receipt and the green card/return receipt to the Affidavit.
Sign and date at the bottom and make one copy of everything.
File at the Prothonotary's Office within ten (10) days of service. Keep a time-stamped copy for your records.

ELEVENTH FORM – AFFIDAVIT OF SERVICE BY PERSONAL SERVICE - This form is completed by someone else who serves the papers for you, and then you file it with the Prothonotary before the conference.

Fill in the caption.
Fill in the blank spaces.
Check the paragraph that best describes how the papers were served.
Have the person who served the papers sign, date, and write his/her address and telephone number at the bottom.
Make one copy and file at the Prothonotary's Office within ten (10) days of service. Keep a time-stamped copy for your records.

Form 12: ACCEPTANCE OF SERVICE Use this form if the other party is willing to sign the form stating that he or she received the papers.

Fill in the caption and the date you filed the Complaint for Custody.
Have the other party sign the form when he or she is handed the papers.
Make one copy and file at the Prothonotary's office within ten (10) days of service. Keep a time-stamped copy for your records.

THE FAMILY COURT CUSTODY CONFERENCE

Your case will be scheduled for a conference with a Family Court Hearing Officer. You must attend the conference. If you do not attend and the other party attends, a Custody Order will be issued anyway. If neither party attends, your petition will be dismissed. Do not bring the children to the conference. Other people may come with you for support, but they won't be able to go into the courtroom where the conference is held.

The Family Court Hearing Officer is an attorney who was appointed by the Court to handle custody cases. In Lycoming County, there are two Hearing Officers.

Before you attend the conference, decide what type of custody schedule you think would work best. Then tell that to the Hearing Officer. The Defendant has the right to attend and tell the Hearing Officer what schedule he/she thinks would be best. Be open to negotiating with the other party. Try to resolve your disputes and reach an agreement. Don't expect to get everything you want.

The Family Court Hearing Officer will listen to both parties and try to work out an agreement. If there is not an agreement, the Family Court Hearing Officer will decide on a temporary order, and will tell both parties what the order will say. The order will be mailed to both parties. The Family Court Hearing Officer will schedule a pre-trial conference in front of a judge. The Hearing Officer may also make a referral for a Guardian Ad Litem.

The Family Court Hearing Officer will mail the Order, confirmed by a Judge's signature, to you and to the Defendant. That Order will be a final Order if you and the Defendant reached an agreement. If you did not reach an agreement, it will be a temporary order, giving you a custody schedule until you reach an agreement at the pre-trial conference or have a custody trial.

YOU MUST FOLLOW THIS ORDER UNTIL IT IS CHANGED. Even if you decide to take some further action, as described below, YOU MUST FOLLOW THE ORDER. A person who intentionally violates the Order can be found in contempt of court. It is also a criminal offense in Pennsylvania to take a child in violation of a Court Order.

If you strongly disagree with the Family Court Hearing Officer's Order, you may file a Petition for Special Relief to try to change it before you attend the pre-trial conference. A separate hearing before the judge will be scheduled on such a petition. You must act as soon as you receive papers from the Hearing Officer. You may also want to consult an attorney, who can discuss with you the possibility of further proceedings before a Judge.

Getting Ready

To prepare for the Custody Conference, think about your answers to these questions:

A. How long have you and the other parent lived separately?

- Since separation who has the child lived with primarily?
- When does the other parent see the child?

B. While you and the other parent lived together, who was primarily responsible for the care of the child?

- Did you both share pretty much equally in the child's care?

C. If the child primarily lives with you, does the other parent have the child regularly?

- Have you been cooperative in arranging for the child to be with the other parent?

D. If the child primarily lives with the other parent, do you have the child regularly?

- If not, why not?

- Has the other parent denied you contact with the child?

E. Does either parent have a history of alcoholism, drug abuse, violent crime, suicide attempts?

- If so, have these problems affected the child, or might they affect the child or the parent-child relationship in the future?

F. Does either parent have a history of abuse of the child or an extremely difficult relationship with the child?

G. Does either parent do things to interfere with the child's relationship with the other parent?

H. What custody schedule do you suggest? Why?

IN ANY SITUATION WHERE PARENTS DO NOT LIVE TOGETHER, THEY HAVE SPECIAL RESPONSIBILITIES TO THEIR CHILD. PLEASE FOLLOW THESE GUIDELINES:

DO:

1. Develop a plan to permit the child to have a regular schedule of time with each parent. If you have a Custody Order, follow that Order and give the other parent extra time when appropriate.

2. Spend time with your child regularly, so the child doesn't feel rejected or abandoned. Be sure your child has a specific place that is his/her own, and room for toys and clothes.

3. Allow the child to call the other parent while he/she is spending time with you.

4. Be sure the other parent always has your current address and phone number

5. Have the child ready on time to be picked up by the other parent, and be on time when you pick up the child. Call the other parent immediately if an emergency keeps you from arriving on time.

6. Encourage your child to respect the other parent.

7. Put your child's interest first. Control your negative feelings toward the other parent, so that the two of you can discuss problems and information about the child without fighting.

DON'T

1. Do not cancel your plans with your child, except in an emergency. If you must cancel, be sure to let your child know why it is necessary.

2. Do not make promises to your child that you suspect you will not be able to keep.

3. Do not pump your child for information about the other parent.

4. Do not expect the other parent to do parenting tasks exactly the same as you would.

5. Do not use the child to carry messages to the other parent.

6. Do not talk with the child about child support disagreements.

7. Do not argue with the other parent or call the other parent names when the child is present.

8. Do not make derogatory comments, call names, or discuss negative aspects of the other parent at any time when the child would hear you.

9. Do not ask the child where he/she wants to live, or put the child in a position where he/she must take sides.

10. Do not use the child as a way to hurt the other parent.

Protecting Confidential Information - Here's How

A certification shall accompany each filing in accordance with the policy. A court or custodian is not required to review any filed document for compliance with this policy. Failure to comply may lead to imposed sanctions.

Confidential Information

Unless required by applicable authority, the following information shall not be included in any document filed with a court or custodian, except on a "Confidential Information Form" filed contemporaneously with the document.

1. Social Security Numbers
2. Financial Account Numbers Except an active financial account number may be identified by the last four digits when the financial account is the subject of the case and cannot otherwise be identified
3. Driver License Numbers
4. State identification (SID) Numbers
5. Minors' Names and Dates of Birth except when a minor is charged as defendant in a criminal matter (see 42 Pa.C.S. §6355)
6. Abuse Victim's Address and other Contact Information including employer's name, address, and work schedule, in family court actions as defined by Pa.R.C.P. No. 1931(a), except for victim's name

Confidential Documents

Unless required by applicable authority, the following documents shall be filed with a court or custodian with the "*Confidential Document Form*."

1. Financial Source Documents
2. Minors' Educational Records
3. Medical/Psychological Records
4. Children and Youth Services' Records
5. Marital Property Inventory and Pre-Trial Statement as provided in Pa.R.C.P. No. 1920.33
6. Income and Expense Statement as provided in Pa.R.C.P. No. 1910.27(c)
7. Agreements between the Parties as used in 23 Pa.C.S. §3105

These requirements do not apply to case types (e.g. juvenile, adoption) that are sealed or exempted from public access pursuant to applicable authority.

For forms and more information, reference the *Case Records Public Access Policy Of The Unified Judicial System Of Pennsylvania* at the website below.

Please visit: http://www.pacourts.us/public-records/public-records-policies

COMPLAINT FOR CUSTODY

PART TWO: FORMS

LYCOMING COUNTY COURT OF COMMON PLEAS
MOTION COVER SHEET

_____,	:	Docket No:
Plaintiff	:	
	:	Case Assigned to Judge
vs.	:	☐ None
	:	☐ Family Court Hearing Officer
_____,	:	
Defendant	:	

1. Name of Filing Party: _____
2. Filing Party's Attorney: _____
3. Type of Filing: _____

4. The following is/are requested: _____Argument _____Evidentiary Hearing _____Court Conference _____Rule to Show Cause _____Entry of Uncontested Order (attach supporting documentation) _____Expedited Consideration. State the basis: _____ _____Video conferencing requested. Request form has been submitted. See Lyc. Co. R.G.C.B. L8. _____Attach this cover sheet to original motion previously filed on: _____	6. Name and addresses of all counsel of record and unrepresented parties:
5. Time Required: _____	____Continued on a Separate Sheet.

ORDER

1. _____An_____argument____factual hearing_____court conference is scheduled for _____

   at_____o'clock _ __. M., in courtroom No._____, Lycoming County Courthouse, Williamsport, PA.

2. _____Briefs are to be filed by the following dates:

   Filing Party_____.

   Responding party (ies)_____.

3. _____A rule is issued upon Respondent to show cause why the Petitioner is not entitled to the relief requested.

4. _____A response to the Motion/Petition shall be filed within_____days.

5. _____See order attached._____See separate order issued this date.

6. _____Other:_____.

7.

_____ _____
Judge Date

c: **ALL PARTIES OR OTHERS TO BE SERVED WITH NOTICEMUST BE DESIGNATED IN "6" ABOVE. NOTICE:** The parties are directed to confer for the purpose of resolving any issue raised in the motion/petition. If a resolution is reached prior to the scheduled date, the moving party shall immediately notify the court scheduling technician, the judge or hearing officer assigned to hear the matter, and all counsel of record or parties if unrepresented. Such notice may be in writing or by email.

LYCOMING COUNTY COURT OF COMMON PLEAS

_____,	:	Docket No:
Plaintiff	:	
	:	
vs.	:	
	:	
_____,	:	
Defendant	:	

ORDER AND NOTICE

You,_____, (non-filing party), have been sued in Court to (obtain/modify)(shared legal custody)(sole legal custody)(partial physical custody)(primary physical custody) (shared physical custody)(sole physical custody)(supervised physical custody) of the child(ren): IDENTIFY EACH CHILD BY INITIALS ONLY- DO NOT WRITE THE NAME
_____

You are ordered to appear in person as directed on the Motion Cover Sheet. If you fail to appear at the scheduled hearing/conference, an order for custody, partial custody, or visitation may be entered against you, or the Court may issue a warrant for your arrest.

You must file with the Court a verification regarding any criminal record or abuse history regarding you and anyone living in your household on or before the initial in-person contact with the Court (including, but not limited to, a conference with a conference officer or judge or conciliation), but not later than 30 days after service of the Complaint or Petition. A blank form is included for that purpose.

No party may make a change in the residence of any child which significantly impairs the ability of the other party to exercise custodial rights without first complying with all of the applicable provisions of 23 Pa. C.S. §5337 and Pa. R.C.P. No. 1915.17, regarding relocation.

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER, GO TO OR TELEPHONE ONE OF THE OFFICES SET FORTH BELOW. THESE OFFICES CAN PROVIDE YOU WITH INFORMATION ABOUT HIRING A LAWYER. IF YOU CANNOT AFFORD TO HIRE A LAWYER, THESE OFFICES MAY BE ABLE TO PROVIDE YOU WITH INFORMATION ABOUT AGENCIES THAT MAY OFFER LEGAL SERVICES TO ELIGIBLE PERSONS AT A REDUCED FEE OR NO FEE.

If you do not have a lawyer, contact:	**If you cannot afford a lawyer, you may be eligible for legal aid through:**
Pennsylvania Bar Association Lawyer Referral Service **100 South Street, P.O. Box 186** **Harrisburg, PA 17108-0186** **(800) 692-7375**	**North Penn Legal Services** **25 West Third Street, Suite 400** **Williamsport, PA 17701** **(570) 323-8741**

BY THE COURT,

Date:_____ _____ J.

AMERICANS WITH DISABILITIES ACT OF 1990

The Court of Common Pleas of Lycoming County is required by law to comply with the Americans With Disabilities Act of 1990. For information about accessible facilities and reasonable accommodations available to disabled individuals having business before the court, please contact the Court Administrator's office, telephone number (570)327-2330. All arrangements must be made at least 72 hours prior to any hearing or business before the court.

LYCOMING COUNTY COURT OF COMMON PLEAS

_____,	:	Docket No:
Plaintiff	:	
	:	
vs.	:	
	:	
_____,	:	
Defendant	:	

NOTICE TO INCARCERATED DEFENDANT

You have the right to petition the court to participate in the proceeding which has been scheduled in this matter.

If you wish to participate, you must complete the enclosed Request for Video Conference and return it to Family Court at 48 West Third Street, Williamsport, PA 17701 as soon as possible so arrangements may be made for you to participate by video.

Note: If you are released from incarceration after making a request for video conference and are therefore able to attend the conference in person, please contact Family Court ahead of time so the arrangements with your place of incarceration may be cancelled.

Instructions for completing the form:

1) Write the docket number assigned to the case. This may be found in the upper right-hand corner of this notice.

2) Write your name and inmate number.

3) Write the name of the place where you are incarcerated.

4) If you have an attorney to represent you in the custody proceeding, write the attorney's name here. If you are incarcerated while awaiting the disposition of charges, also write the name of the attorney representing you on those charges on the line in the cc list at the bottom of the page.

5) This blank is already filled in.

Write the date and time of the conference on the next blank line. This information can be found on the first page of the paperwork you received, the Motion Cover Sheet.

Write the courtroom number on the next blank line. This can be found in the same place.

DO NOT WRITE ANYTHING ELSE ON THIS FORM.

Mail the completed form to:

Family Court
Lycoming County Courthouse
48 West Third Street
Williamsport, PA 17701

REQUEST FOR VIDEO CONFERENCE

This form should be completed by an incarcerated party who wishes to participate in a Family Court proceeding by video conference.

PLEASE RETURN THIS FORM TO THE LYCOMING COUNTY FAMILY COURT OFFICE.
48 WEST THIRD STREET, WILLIAMSPORT, PA 17701

1) Docket #: _____
2) Name of Inmate and Inmate #: _____
3) Place of Confinement: _____
4) Inmate's Attorney (if any): _____
5) Type of Hearing: _____Custody Conference_____

- Date and Time of Conference_____
- Courtroom _____

DO NOT WRITE BELOW THIS LINE (FOR COURTS USE ONLY)

◯ Request Approved
◯ Request Denied

_____ _____
Date Judge

Cc: Court Scheduling Technician
Information Services
Public Defender/Private Counsel _____

Confirmation # _____

LYCOMING COUNTY COURT OF COMMON PLEAS

_____,	:	Docket No:
Plaintiff	:	
	:	
vs.	:	
	:	
_____,	:	
Defendant	:	

ENTRY OF APPEARANCE OF SELF-REPRESENTED PARTY

Pursuant to Pa.R.C.P. No. 1930.8

1. My name is_____.

2. I am the _____Plaintiff
   _____Defendant

3. I represent myself in this action.

4. REMOVAL OR WITHDRAWAL OF COUNSEL OF RECORD (IF APPLICABLE)
   [FILL OUT THIS PART ONLY IF YOU HAVE AN ATTORNEY OF RECORD]

   _____ Remove_____, Esquire as my attorney of record.

   _____ Withdraw my appearance for the filing party
   _____, Esquire (Print attorney name) ID#_____
   _____ Attorney Signature Date: _____

5. I understand that I am under a continuing obligation to provide current contact information to the court, to other self-represented parties, and to attorneys of record.

All pleadings and legal papers can be served on me at the address listed below, which may or may not be my home address pursuant to Rule 1930.8.

Print Name: _____ Date: _____

Signature: _____Telephone Number: _____

Address: _____

Email: _____

THE PARTY FILING THIS ENTRY OF APPEARANCE MUST PROVIDE NOTICE BY SENDING A COPY TO ALL PARTIES AND ATTORNEYS, INCLUDING THE ATTORNEY REMOVED FROM THE CASE.

IN THE COURT OF COMMON PLEAS OF LYCOMING COUNTY, PENNSYLVANIA

_____,	: NO. _____
Plaintiff	:
vs.	: CIVIL ACTION – LAW
	: CUSTODY
_____,	:
Defendant	:

COMPLAINT FOR CUSTODY

1. The Plaintiff is_____, residing at

_____.

(Street, City, State, Zip Code and County)

Plaintiff's phone number is _____.

2. The Defendant is _____, residing at

_____.

(Street, City, State, Zip Code and County)

Defendant's phone number is _____.

3. Plaintiff seeks (shared legal custody) (sole legal custody) (partial physical custody) (primary physical custody) (shared physical custody) (sole physical custody) (supervised physical custody) of the following child(ren): IDENTIFY EACH CHILD BY INITIALS ONLY- DO NOT WRITE THE NAME

Initials	Age	Present Residence	Was the child born out of wedlock?	
_____	_____	_____	_____yes	_____no
_____	_____	_____	_____yes	_____no
_____	_____	_____	_____yes	_____no
_____	_____	_____	_____yes	_____no

The children are presently in the custody of _____(name)

who resides at _____(address).

During the past five years, the child(ren) has/have resided with the following persons at the following addresses:

Address	persons in that home	dates of residence
a)_____	_____	_____to_____
_____	_____	
b)_____	_____	_____to_____
_____	_____	
c)_____	_____	_____to_____
_____	_____	

A parent of the child(ren) is _____ currently residing at _____

_____. This parent is (married) (divorced) (single).

A parent of the child(ren) is _____ currently residing at _____

_____. This parent is (married) (divorced) (single).

4. Plaintiff's relationship to the children is that of _____. Plaintiff currently resides with the following persons:

Name	Relationship
_____	_____
_____	_____
_____	_____
_____	_____

5. Defendant's relationship to the children is that of _____. Defendant currently resides with the following persons:

Name	Relationship
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

6. Plaintiff (has) (has not) participated as a party or witness, or in another capacity, in other litigation concerning the custody of the child(ren) in this or another court. If yes, the county and docket number is: _____.

Plaintiff (has) (has no) information of a custody proceeding concerning the child(ren) pending in a court of this Commonwealth or any other state. If yes, the county and docket number is:

_____.

Plaintiff (knows) (does not know) of a person not a party to the proceedings who has had physical custody of the child(ren) in the past or claims to have custodial rights with respect to the child(ren). The name and address of such person is: _____

_____.

7. The child(ren)'s best interest and permanent welfare will be served by granting the relief requested because: _____

_____

_____

_____.

8. Each parent whose parental rights to the child have not been terminated and the person who has physical custody of the child(ren) have been named as parties to this action. All other persons, named below, who are known to have or claim a right to custody of the child(ren) will be given notice of the pendency of this action and the right to intervene:

Name	Address	Basis of Claim
_____	_____	_____
	_____	
_____	_____	_____
	_____	

9. (a) If the plaintiff is seeking physical or legal custody of a child and is *in loco parentis* to the child, the plaintiff shall plead facts establishing standing under 23 Pa.C.S. Section 5324(2): _____

_____

_____

_____

_____.

(b) If the plaintiff is a grandparent seeking physical or legal custody of a grandchild and is not *in loco parentis* to the child, the plaintiff shall plead facts establishing standing under 23 Pa.C.S. Section 5324(3):

_____

_____

_____

_____.

(c) If the plaintiff is seeking physical or legal custody of a child and is not *in loco parentis* to the child, the plaintiff shall plead facts establishing standing pursuant to 23 Pa.C.S. Sections 5324(4) & (5):

_____

_____

_____

_____.

(d) If the plaintiff is a grandparent or great-grandparent seeking partial physical custody or supervised physical custody of a grandchild or great-grandchild, the plaintiff shall plead facts establishing standing under 23 Pa.C.S. Section 5325: _____

_____

_____

_____.

10. Plaintiff has attached the Criminal Record/Abuse History Verification form required pursuant to Pa.R.C.P. No. 1915.3-2.

WHEREFORE, Plaintiff requests the Court to grant: □ shared legal custody

□ sole legal custody □ partial physical custody □ primary physical custody

□ shared physical custody □ sole physical custody □ supervised physical custody of the child(ren).

_____

Signature

I verify that the information above is true and correct to the best of my knowledge, information, or belief. I understand that false statements herein are made subject to penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities.

_____

Signature

_____,	: IN THE COURT OF COMMON PLEAS OF
Plaintiff	: LYCOMING COUNTY, PENNSYLVANIA
	:
vs.	: No. _____
	:
_____,	: CIVIL ACTION - LAW
Defendant	: CUSTODY

PLAINTIFF CRIMINAL RECORD/ABUSE HISTORY VERIFICATION

I, _____, hereby swear or affirm, subject to penalties of law including 18 Pa.C.S.§4904 relating to unsworn falsification to authorities that:

1. Participants: Please list ALL members in your/the participant's household and attach sheets if necessary:

Name	*Date of Birth*	*Address*	*Relationship to Child(ren)*

_____Party requests their residence remain confidential as they are protected by the Protection from Abuse Act, 23 Pa. C.S. §6112, or the Domestic and Sexual Violence Victim Address Confidentiality Act, 23 PA.C.S. §§ 6701-6713, or the Child Custody Act, 23 Pa.C.S. § 5336(b), or they are in the process of seeking protection under the same.

Please list ALL Members in the opposing party's household and attach sheets if necessary:

Name	*Date of Birth*	*Address*	*Relationship to Child(ren)*

_____Party requests their residence remain confidential as they are protected by the Protection from Abuse Act, 23 Pa. C.S. §6112, or the Domestic and Sexual Violence Victim Address Confidentiality Act, 23 PA.C.S. §§ 6701-6713, or the Child Custody Act, 23 Pa.C.S. § 5336(b), or they are in the process of seeking protection under the same.

SUBJECT CHILD(REN) – attach additional sheets if necessary:

Name	*Date of Birth*

2. *Criminal Offenses:* As to the following listed Pennsylvania crimes or offenses, or another jurisdiction's substantially equivalent crimes or offenses, check the box next to any applicable crime or offense in which you or a household member:

- has pleaded guilty or no contest;
- has been convicted;
- has charges pending; or
- has been adjudicated delinquent under the Juvenile Act, 42 Pa.C.S. §§ 6301-6375, and the record is publicly available as set forth in 42 Pa.C.S. § 6307.

You should also check the box next to a listed criminal offense even if the offense has been resolved by Accelerated Rehabilitative Disposition (ARD) or another diversionary program, unless it has been expunged pursuant to 18 Pa.C.S. § 9122, or court has entered an order for limited access, *e.g.*, Clean Slate, pursuant to 18 Pa.C.S. §§ 9122.1 or 9122.2:

Check all that apply	**Crime**	**Self**	**Other household member**	**Date of conviction, guilty plea, no contact plea, or pending charges**	**Sentence**
	18 Pa.C.S. Ch. 25 (relating to criminal homicide)				
	18 Pa.C.S. §2701 (relating to simple assault)				
	18 Pa.C.S. §2702 (relating to aggravated assault)				
	18 Pa.C.S. §2705 (relating to recklessly endangering another person)				
	18 Pa.C.S. §2706 (relating to terroristic threats)				
	18 Pa.C.S. §2709.1 (relating to stalking)				

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contact plea, or pending charges	Sentence
	18 Pa.C.S. §2718 (relating to strangulation)				
	18 Pa.C.S. §2901 (relating to kidnapping)				
	18 Pa.C.S. §2902 (relating to unlawful restraint)				
	18 Pa.C.S. §2903 (relating to false imprisonment)				
	18 Pa.C.S. §2704 (relating to interference with custody of children)				
	18 Pa.C.S. §2910 (relating to luring a child into a motor vehicle or structure)				
	18 Pa.C.S. Ch. 30 (relating to human trafficking)				
	18 Pa.C.S. §3121 (relating to rape)				
	18 Pa.C.S. §3122.1 (relating to statutory sexual assault)				
	18 Pa.C.S. §3123 (relating to involuntary deviate sexual intercourse)				
	18 Pa.C.S. §3124.1 (relating to sexual assault)				
	18 Pa.C.S. §3125 (relating to aggravated indecent assault)				
	18 Pa.C.S. §3126 (relating to indecent assault)				
	18 Pa.C.S. §3127 (relating to indecent exposure)				
	18 Pa.C.S. §3129 (relating to sexual intercourse with animal)				
	18 Pa.C.S. §3130 (relating to conduct relating to sex offenders)				
	18 Pa.C.S. §3301 (relating to arson and related offenses)				

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contact plea, or pending charges	Sentence
	18 Pa.C.S. §4302 (relating to incest)				
	18 Pa.C.S. §4303 (relating to concealing death of child)				
	18 Pa.C.S. §4305 (relating to dealing in infant children)				
	18 Pa.C.S. §5533 (relating to cruelty to animal)				
	18 Pa.C.S. §5534 (relating to aggravated cruelty to animal)				
	18 Pa.C.S. §5543 (relating to animal fighting)				
	18 Pa.C.S. §5544 (relating to possession of animal fighting paraphernalia)				
	18 Pa.C.S. §5902(b) or (b.1) (relating to prostitution and related offenses)				
	18 Pa.C.S. §5903(c) or (d) (relating to obscene and other sexual materials and performances)				
	18 Pa.C.S. §6301 (relating to corruption of minors)				
	18 Pa.C.S. §6312 (relating to sexual abuse of children)				
	18 Pa.C.S. §6318 (relating to unlawful contact with minor)				
	18 Pa.C.S. §6320 (relating to sexual exploitation of children)				
	Finding of contempt of a Protection of Victims of Sexual Violence and Intimidation order or agreement under 42 Pa.C.S. § 62A14				

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contact plea, or pending charges	Sentence
	Driving under the influence of drugs or alcohol				
	Manufacture, sale, delivery, holding, offering for sale or possession of any controlled substance or other drug or device				

3. *Abuse or Agency Involvement.* Check the box next to any statement that applies to you, a household member, or your child:

Check all that Apply		Self	Household Member	Child
	Involvement with a children and youth social service agency in Pennsylvania or a similar agency in another jurisdiction. What jurisdiction? _____			
	A determination or finding of abuse (*i.e.*, indicated or founded report) by a children & youth social service agency or court in Pennsylvania or a similar agency or court in another jurisdiction. What jurisdiction? _____			
	An adjudication of dependency involving this child or any other child under Pennsylvania's Juvenile Act, or a similar law in another jurisdiction. What jurisdiction? _____ Is the case active? _____			

Check all that Apply		Self	Household Member	Child
	A history of perpetrating "abuse" as that term is defined in the Protection from Abuse Act, 23 Pa.C.S. §6102.			
	A history of perpetrating "sexual violence" or "intimidation" as those terms are defined in 42 Pa.C.S. §62A03 (relating to protection of victims of sexual violence and intimidation).			
	Other:			

4. If you checked a box in (2) or (3), list any evaluation, counseling or other treatment received as a result:

_____

_____

5. If you checked a box in (2) or (3) that applies to your household member, who is not a party, state that person's name, date of birth, and relationship to the child:

_____

_____

6. If you are aware that the other party or the other party's household member has a criminal record or abuse history, please explain:

_____

_____

ONLY A PARTY CAN SIGN THIS FORM. IF A PARTY IS REPRESENTED BY AN ATTORNEY, THE ATTORNEY CANNOT SIGN THIS FORM ON BEHALF OF THE PARTY.

I verify that the information above is true and correct to the best of my knowledge, information, or belief. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. §4904 relating to unsworn falsification to authorities.

_____
Signature

_____
Printed Name

_____
Date

I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

_____
Signature of filer

_____
Printed Name

_____,	: IN THE COURT OF COMMON PLEAS OF
Plaintiff	: LYCOMING COUNTY, PENNSYLVANIA
	:
vs.	: No. _____
	:
_____,	: CIVIL ACTION - LAW
Defendant	: CUSTODY

DEFENDANT CRIMINAL RECORD/ABUSE HISTORY VERIFICATION

I, _____, hereby swear or affirm, subject to penalties of law including 18 Pa.C.S.§4904 relating to unsworn falsification to authorities that:

3. Participants: Please list ALL members in your/the participant's household and attach sheets if necessary:

Name	*Date of Birth*	*Address*	*Relationship to Child(ren)*

_____Party requests their residence remain confidential as they are protected by the Protection from Abuse Act, 23 Pa. C.S. §6112, or the Domestic and Sexual Violence Victim Address Confidentiality Act, 23 PA.C.S. §§ 6701-6713, or the Child Custody Act, 23 Pa.C.S. § 5336(b), or they are in the process of seeking protection under the same.

Please list ALL Members in the opposing party's household and attach sheets if necessary:

Name	*Date of Birth*	*Address*	*Relationship to Child(ren)*

_____Party requests their residence remain confidential as they are protected by the Protection from Abuse Act, 23 Pa. C.S. §6112, or the Domestic and Sexual Violence Victim Address Confidentiality Act, 23 PA.C.S. §§ 6701-6713, or the Child Custody Act, 23 Pa.C.S. § 5336(b), or they are in the process of seeking protection under the same.

SUBJECT CHILD(REN) – attach additional sheets if necessary:

Name	*Date of Birth*

4. *Criminal Offenses:* As to the following listed Pennsylvania crimes or offenses, or another jurisdiction's substantially equivalent crimes or offenses, check the box next to any applicable crime or offense in which you or a household member:

- has pleaded guilty or no contest;
- has been convicted;
- has charges pending; or
- has been adjudicated delinquent under the Juvenile Act, 42 Pa.C.S. §§ 6301-6375, and the record is publicly available as set forth in 42 Pa.C.S. § 6307.

You should also check the box next to a listed criminal offense even if the offense has been resolved by Accelerated Rehabilitative Disposition (ARD) or another diversionary program, unless it has been expunged pursuant to 18 Pa.C.S. § 9122, or court has entered an order for limited access, *e.g.*, Clean Slate, pursuant to 18 Pa.C.S. §§ 9122.1 or 9122.2:

Check all that apply	**Crime**	**Self**	**Other household member**	**Date of conviction, guilty plea, no contact plea, or pending charges**	**Sentence**
	18 Pa.C.S. Ch. 25 (relating to criminal homicide)				
	18 Pa.C.S. §2701 (relating to simple assault)				
	18 Pa.C.S. §2702 (relating to aggravated assault)				
	18 Pa.C.S. §2705 (relating to recklessly endangering another person)				
	18 Pa.C.S. §2706 (relating to terroristic threats)				
	18 Pa.C.S. §2709.1 (relating to stalking)				

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contact plea, or pending charges	Sentence
	18 Pa.C.S. §2718 (relating to strangulation)				
	18 Pa.C.S. §2901 (relating to kidnapping)				
	18 Pa.C.S. §2902 (relating to unlawful restraint)				
	18 Pa.C.S. §2903 (relating to false imprisonment)				
	18 Pa.C.S. §2704 (relating to interference with custody of children)				
	18 Pa.C.S. §2910 (relating to luring a child into a motor vehicle or structure)				
	18 Pa.C.S. Ch. 30 (relating to human trafficking)				
	18 Pa.C.S. §3121 (relating to rape)				
	18 Pa.C.S. §3122.1 (relating to statutory sexual assault)				
	18 Pa.C.S. §3123 (relating to involuntary deviate sexual intercourse)				
	18 Pa.C.S. §3124.1 (relating to sexual assault)				
	18 Pa.C.S. §3125 (relating to aggravated indecent assault)				
	18 Pa.C.S. §3126 (relating to indecent assault)				
	18 Pa.C.S. §3127 (relating to indecent exposure)				
	18 Pa.C.S. §3129 (relating to sexual intercourse with animal)				
	18 Pa.C.S. §3130 (relating to conduct relating to sex offenders)				
	18 Pa.C.S. §3301 (relating to arson and related offenses)				

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contact plea, or pending charges	Sentence
	18 Pa.C.S. §4302 (relating to incest)				
	18 Pa.C.S. §4303 (relating to concealing death of child)				
	18 Pa.C.S. §4305 (relating to dealing in infant children)				
	18 Pa.C.S. §5533 (relating to cruelty to animal)				
	18 Pa.C.S. §5534 (relating to aggravated cruelty to animal)				
	18 Pa.C.S. §5543 (relating to animal fighting)				
	18 Pa.C.S. §5544 (relating to possession of animal fighting paraphernalia)				
	18 Pa.C.S. §5902(b) or (b.1) (relating to prostitution and related offenses)				
	18 Pa.C.S. §5903(c) or (d) (relating to obscene and other sexual materials and performances)				
	18 Pa.C.S. §6301 (relating to corruption of minors)				
	18 Pa.C.S. §6312 (relating to sexual abuse of children)				
	18 Pa.C.S. §6318 (relating to unlawful contact with minor)				
	18 Pa.C.S. §6320 (relating to sexual exploitation of children)				
	Finding of contempt of a Protection of Victims of Sexual Violence and Intimidation order or agreement under 42 Pa.C.S. § 62A14				

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contact plea, or pending charges	Sentence
	Driving under the influence of drugs or alcohol				
	Manufacture, sale, delivery, holding, offering for sale or possession of any controlled substance or other drug or device				

3. *Abuse or Agency Involvement.* Check the box next to any statement that applies to you, a household member, or your child:

Check all that Apply		Self	Household Member	Child
	Involvement with a children and youth social service agency in Pennsylvania or a similar agency in another jurisdiction. What jurisdiction? _____			
	A determination or finding of abuse (*i.e.*, indicated or founded report) by a children & youth social service agency or court in Pennsylvania or a similar agency or court in another jurisdiction. What jurisdiction? _____			
	An adjudication of dependency involving this child or any other child under Pennsylvania's Juvenile Act, or a similar law in another jurisdiction. What jurisdiction? _____ Is the case active? _____			

Check all that Apply		Self	Household Member	Child
	A history of perpetrating "abuse" as that term is defined in the Protection from Abuse Act, 23 Pa.C.S. §6102.			
	A history of perpetrating "sexual violence" or "intimidation" as those terms are defined in 42 Pa.C.S. §62A03 (relating to protection of victims of sexual violence and intimidation).			
	Other:			

4. If you checked a box in (2) or (3), list any evaluation, counseling or other treatment received as a result:

_____

_____

5. If you checked a box in (2) or (3) that applies to your household member, who is not a party, state that person's name, date of birth, and relationship to the child:

_____

_____

6. If you are aware that the other party or the other party's household member has a criminal record or abuse history, please explain:

_____

_____

ONLY A PARTY CAN SIGN THIS FORM. IF A PARTY IS REPRESENTED BY AN ATTORNEY, THE ATTORNEY CANNOT SIGN THIS FORM ON BEHALF OF THE PARTY.

I verify that the information above is true and correct to the best of my knowledge, information, or belief. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. §4904 relating to unsworn falsification to authorities.

_____
Signature

_____
Printed Name

_____
Date

I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

_____
Signature of filer

_____
Printed Name

CONFIDENTIAL INFORMATION FORM

APPELLATE/TRIAL COURT CASE RECORDS

Public Access Policy of the Unified Judicial System of Pennsylvania:
Case Records of the Appellate and Trial Courts
204 Pa. Code § 213.81

www.pacourts.us/public-records

_____ _____
(Party name as displayed in case caption) Docket/Case No.

Vs.

_____ _____
(Party name as displayed in case caption) Court

This form is associated with the pleading titled_____, dated_____.

Pursuant to *the Public Access Policy of the Unified Judicial System of Pennsylvania : Case Records of the Appellate and Trial Courts*, the Confidential Information Form shall accompany a filing where confidential information is **required by law, ordered by the court, or otherwise necessary to effect the disposition of a matter**. This form, and any additional pages, shall remain confidential, except that it shall be available to the parties, counsel of record, the court, and the custodian. This form, and any additional pages, must be served on all unrepresented parties and counsel of record.

This Information Pertains to:	Confidential Information	References in Filing:
_____ (full name of adult) OR This information pertains to a minor with the initials of_____and the full name of _____ (full name of minor) And date of birth: _____	Social Security Number (SSN): _____ Financial Account Number (FAN): _____ Driver's License Number (DLN): _____ State of Issuance: _____ State Identification Number (SID): _____	Alternative Reference: SSN 1 Alternative Reference: FAN 1 Alternative Reference: DLN 1 Alternative Reference: SID 1
_____ (full name of adult) OR This information pertains to a minor with the initials of_____and the full name of _____ (full name of minor) And date of birth_____	Social Security Number (SSN): _____ Financial Account Number (FAN): _____ Driver's License Number (DLN): _____ State of Issuance: _____ State Identification Number (SID): _____	Alternative Reference: SSN 2 Alternative Reference: FAN 2 Alternative Reference: DLN 2 Alternative Reference: SID 2

THIS FORM IS CONFIDENTIAL

CONFIDENTIAL INFORMATION FORM

APPELLATE/TRIAL COURT CASE RECORDS

Additional page for additional children (if necessary)

This Information Pertains to:	Confidential Information	References in Filing:
_____ (full name of adult) OR This information pertains to a minor with the initials of_____and the full name of _____ (full name of minor) And date of birth: _____	Social Security Number (SSN): _____ Financial Account Number (FAN): _____ Driver's License Number (DLN): _____ State of Issuance: _____ State Identification Number (SID):	Alternative Reference: SSN _ Alternative Reference: FAN _ Alternative Reference: DLN _ Alternative Reference: SID _
_____ (full name of adult) OR This information pertains to a minor with the initials of_____and the full name of _____ (full name of minor) And date of birth _____	Social Security Number (SSN): _____ Financial Account Number (FAN): _____ Driver's License Number (DLN): _____ State of Issuance: _____ State Identification Number (SID):	Alternative Reference: SSN _ Alternative Reference: FAN _ Alternative Reference: DLN _ Alternative Reference: SID _

THIS FORM IS CONFIDENTIAL

CONFIDENTIAL INFORMATION FORM

APPELLATE/TRIAL COURT CASE RECORDS

Additional page(s) attached._____total pages are attached to this filing.

I certify that this filing complies with the provisions of the *Public Access Policy of the Unified Judicial System of Pennsylvania: Case Records of the Appellate and Trial Courts* that require filing confidential information and documents differently than non-confidential information and documents.

_____ _____

Signature of Attorney or Unrepresented Party Date

Name:_____ Attorney Number: (if applicable) _____

Address:_____ Telephone: _____

_____ Email: _____

NOTE: Parties and attorney of record in a case will have access to this Confidential Information Form.

Confidentiality of this information must be maintained.

THIS FORM IS CONFIDENTIAL

_____,	**:**	**IN THE COURT OF COMMON PLEAS OF**
Plaintiff	**:**	**LYCOMING COUNTY, PENNSYLVANIA**
	:	
vs.	**:**	
	:	
_____,	**:**	**NO. _____**
Defendant	**:**	

ORDER

AND NOW, this _____ day of _____**,** 20**_____**, the Court having reviewed the Application to Waive Fees and Costs, it is hereby ORDERED and DIRECTED that:

- ❑ the request of _____, to proceed pursuant to Pa.R.J.A. No. 1990 and waive fees and costs is GRANTED.
- ❑ the request of _____, to proceed pursuant to Pa.R.J.A. No. 1990 and waive fees and costs is DENIED for the following reason(s):

  _____ Application is incomplete.

  _____ Petitioner's income exceeds income guidelines.

  _____ Petitioner's assets exceed asset guidelines.

  _____ Other: _____.

  and the applicant has thirty (30) days to pay the filing fee or the action will be terminated without further notice.

BY THE COURT:

_____

J.

Distribution:

_____

_____,	**:**	**IN THE COURT OF COMMON PLEAS OF**
Plaintiff	**:**	**LYCOMING COUNTY, PENNSYLVANIA**
	:	
vs.	**:**	
	:	
_____,	**:**	**NO. _____**
Defendant	**:**	

APPLICATION TO WAIVE FEES AND COSTS

EACH QUESTION MUST BE ANSWERED. AN INCOMPLETE APPLICATION MAY RESULT IN A DENIAL. IF A QUESTIONS REFERS TO INCOME OR PROPERTY THAT YOU DO NOT HAVE, YOU SHOULD ANSWER "NONE."

PARTY INFORMATION

Party Name: _____
First Middle Last

Residence: _____

City, State, Zip: _____

☐ Check this box if you are currently without a house or apartment.

PUBLIC BENEFITS

Do you currently receive one or more of the following public benefits?

- Supplemental Nutrition Assistance Program (SNAP) (food stamps)
- Medicaid
- Supplemental Security Income (SSI) (Not Social Security Disability Insurance (SSDI))
- Temporary Assistance to Needy Families (TANF)
- Public Housing or Section 8 Housing
- Needs-based VA Pension
- Low-Income Energy Assistance
- Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
- Other need-based federal, state, or local program: _____
  Name of Program

☐ YES ☐ NO

If you answered YES, skip the remainder of the form and sign/date the VERIFICATION on the last page.

HOUSEHOLD MEMBERS

I am providing the following information about people who live with me.

I support ____ adult children who are incapable of self-support due to physical or mental disability.

I support ____ children under age 18.

GROSS MONTHLY INCOME
(income before paying taxes and other deductions)

Employment

Monthly gross wages: $_____

I work as a _____ for _____.
job title or description name of employer

Unemployment Compensation

Monthly unemployment benefit: $_____

I have been unemployed since _____.

My last employer was _____.

Other Sources of Income

Money received from other people: $_____

Retirement / Pension: $_____

Disability Benefits: $_____

Workers' Compensation: $_____

Child / Spousal Support: $_____

Social Security: $_____

Other Sources (_____): $_____
description

Total Monthly Gross Income (from all sources above): $_____

ASSETS (Current Value)

Cash: $_____

Bank Accounts or Other Financial Assets: $_____

Primary Vehicle: $_____

Other Vehicles: $_____

House: $_____

Other Real Estate: $_____

Other Property: $_____

Total Value of Property: $_____

MONTHLY EXPENSES

Rent/Mortgage Payment: $_____

Food and Household Supplies: $_____

Utilities (Including Cell Phone): $_____

Clothing and Personal Expense: $_____

Medical and Dental Expenses/Insurance: $_____

Child Care: $_____

Transportation (including car payments & repairs): $_____

Child and Spousal Support or Alimony: $_____

Other Expenses:

_____ $_____
Description

_____ $_____
Description

_____ $_____
Description

Total Monthly Expenses: $_____

ADDITIONAL INFORMATION

Are there other facts that you would like the Court to know about your circumstances that may help the Court decide whether to grant your application, such as homelessness, health issues, disability, or other financial hardships?

_____

_____

_____

_____

_____

VERIFICATION

I understand that I have a continuing obligation to inform the Court of an improvement in my financial circumstances that would permit me to pay the fees and costs in this case. If I fail to inform the Court of any changes in my circumstances, I understand that the Court may rescind the waiver of fees and costs and order me to pay those fees and costs.

I verify that the statements made in this application are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. § 4904, relating to unsworn falsification to authorities.

Signature: _____ Date: _____

Printed Name: _____ Phone Number: _____

_____,	: IN THE COURT OF COMMON PLEAS OF
Plaintiff	: LYCOMING COUNTY, PENNSYLVANIA
	:
vs.	: CIVIL ACTION - LAW
	: CUSTODY
_____,	:
Defendant	: NO.

AFFIDAVIT OF SERVICE BY CERTIFIED MAIL AND REGULAR MAIL

I,_____, certify that on_____, I
(your name) (date mailed)
mailed a true and correct copy of the Motion Cover Sheet, Order and Notice, Complaint For Custody, completed Criminal Record/Abuse History Verification, a blank Criminal Record/Abuse History Verification, and the Confidential Information Form. These documents were sent by certified mail, restricted delivery, return receipt requested, to:

_____
(other party's name and address)

_____

_____

I also mailed a true and correct copy of these documents by regular mail to the other party at the same address on_____.
(date mailed)

□ The other party received the documents on_____.
(date received)
Sender's receipt and return receipt are attached.

□ The other party refused the certified mail, and the sender's receipt and refusal are attached.

□ The regular mail has not been returned as undeliverable.

I verify that the foregoing is true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities.

Date:_____ Petitioner's Signature: _____

_____,	: IN THE COURT OF COMMON PLEAS OF
Plaintiff	: LYCOMING COUNTY, PENNSYLVANIA
	:
vs.	: CIVIL ACTION - LAW
	: CUSTODY
_____,	:
Defendant	: NO.

AFFIDAVIT OF SERVICE BY COMMERCIAL CARRIER AND REGULAR MAIL

I,_____, certify that on_____, I
(your name) (date mailed)
sent a true and correct copy of the Motion Cover Sheet, Order and Notice, Complaint For Custody, completed Criminal Record/Abuse History Verification, a blank Criminal Record/Abuse History Verification, and the Confidential Information Form. These documents were sent by commercial carrier, restricted delivery, return receipt requested, to:

_____
(other party's name and address)

_____

_____

I also mailed a true and correct copy of these documents by regular mail to the other party at the same address on_____.
(date mailed)

□ The other party received the documents on_____.
(date received)
Sender's receipt and return receipt are attached.

□ The other party refused the delivery, and the sender's receipt and refusal are attached.

□ The regular mail has not been returned as undeliverable.

I verify that the foregoing is true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities.

Date:_____ Petitioner's Signature: _____

_____,	: IN THE COURT OF COMMON PLEAS OF
Plaintiff	: LYCOMING COUNTY, PENNSYLVANIA
	:
vs.	: CIVIL ACTION – LAW
	: CUSTODY
_____,	:
Defendant	: NO.

AFFIDAVIT OF PERSONAL SERVICE

I,_____, certify that I am a competent adult who is
(person serving other party)
18 years of age or older, and I am not a party to this action or an employee or relative of a party to this action. On_____, I served a true and correct copy of the
(date)
Motion Cover Sheet, Notice and Order, Complaint for Custody, completed Criminal Record/Abuse History Verification, a blank Criminal Record/Abuse History Verification, and the Confidential Information Form upon _____ by:
(other party)

□ handing a copy to him/her;
□ handing a copy to an adult family member at his/her residence by the name of _____;
□ handing a copy to an adult in charge of his/her residence by the name of _____;
□ handing a copy to an adult in charge at his/her place of employment by the name of _____,

at this address/location:_____, (place served)
at approximately _____(time of day/am-pm).

I verify that the foregoing is true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa. C.S. §4904 relating to unsworn falsification to authorities.

Date: _____ _____(server's signature)

Name: _____

Address_____

_____

Phone: _____

_____,	: IN THE COURT OF COMMON PLEAS OF
Plaintiff	: LYCOMING COUNTY, PENNSYLVANIA
	:
vs.	: CIVIL ACTION – LAW
	: CUSTODY
_____,	:
Defendant	: NO.

ACCEPTANCE OF SERVICE

_____ I accept service of the Motion Cover Sheet, Notice and Order, Complaint for Custody, completed Criminal Record/Abuse History Verification, a blank Criminal Record/Abuse History Verification, and the Confidential Information Form filed on _____(date).

Date: _____ _____

signature