
Name

Mailing Address

City, State Zip Code

Phone Number Email

- Petitioner (without attorney/advocate)
- Respondent (without attorney/advocate)
- Attorney/Advocate for _____

IN THE TRIBAL COURT OF THE CONFEDERATED SALISH AND KOOTENAI
TRIBES OF THE FLATHEAD RESERVATION, PABLO, MONTANA

<input type="checkbox"/> In re the Marriage of: <input type="checkbox"/> In re the Parenting concerning: _____, Petitioner(s) and Respondent(s)	Cause No. _____ <input type="checkbox"/> PETITIONER <input type="checkbox"/> RESPONDENT <input type="checkbox"/> Other: _____ <p style="text-align: center;">PROPOSED PARENTING PLAN</p>
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The Court requires some form of **written Parenting Plan** addressing all issues which are relevant to the facts of your case. The written Parenting Plan must contain provisions for decision-making and parenting time. You may use this form as a Parenting Plan to submit to the Court. This standard form **does not** include every possible issue that may be relevant to the facts of your case. A section entitled “Other Terms” is available for you to identify unique issues that you may have in your case. **If you need more space than is provided, attach additional pages to the form and indicate the corresponding paragraph that goes with the attachment. Any additional pages must include signatures.**

To promote agreement, the parties may jointly create a written Parenting Plan. If you do not enter into a joint written Parenting Plan, you must each file your own written Parenting Plan. Without an agreement, the Court **must** enter its own plan which may be a plan filed by one of the parties or may be entirely different. Whether the Court approves your plan or enters its own, the Parenting Plan will become a Court Order.

This is a:

- Full Joint Parenting Plan** (we agree to everything and the plan is signed by both parties.)
- Partial Joint Parenting Plan** (we agree to some things and the plan is signed by both parties.)
- No Agreement—Proposed Parenting Plan prepared by one party** (prepared by signer and mailed to the other party.)

If this is a partial joint Parenting Plan or a Parenting Plan prepared by one party, please complete and file with the Court a **Pretrial Statement [TCF 0007]** to identify issues that you have not agreed on. **This is a required form if you have any issues that you cannot agree on. A hearing may be necessary to address the issues.**

SECTION 1: IDENTIFYING INFORMATION

1. Petitioner is the child(ren)’s:
 Father **Mother** **Other Party** (state relationship to child(ren)) _____

2. Respondent is the child(ren)’s:
 Father **Mother** **Other Party** (state relationship to child(ren)) _____

3. The child(ren) are:

Full Name of Child	Present Address	Date of Birth

SECTION 2: DECISION-MAKING

1. The parties understand that day-to-day decisions such as minor training or correction, minor medical and dental care, curfew, chores, allowance, clothing, hygiene, etc. will be made by the party who has the child(ren) at the time such decisions are necessary.

2. Each party will inform the other party of any changes with their address and/or phone numbers in advance.

3. Both parties will provide the names, addresses, and telephone numbers of all medical, dental, and mental health care providers. Either party may authorize emergency care, but if possible both parties agree to contact the other party first.

4. Unless otherwise ordered by the Court for good cause shown, this Court shall recognize that Montana state law provides that both parties have access to the records of the child(ren) including school, medical, dental, and mental health records.

5. For purposes of school attendance only, the child(ren)’s residence will be with the:
 Petitioner **Respondent** **Other Party** _____
Note: The Other Party must be named in the case as Petitioner, Respondent or an Intervenor to be included in this Parenting Plan.

6. **Major Decisions.** We have identified below whether the major decisions (Education, Medical/Dental Mental Health, Cultural and Religious) will be joint or will be made by one party. If major decision will be made by someone other than one of the parents, check the “Other Party” column.

Note: The Other Party must be named in the case as the Petitioner, Respondent or an Intervenor to be included in this Parenting Plan.

Type of Major Decision-Making	Joint	Respondent	Petitioner	Other Party
Educational, if needed specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medical/Dental/Mental Health, if needed specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Religious, if needed specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cultural, if needed specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extracurricular and Recreational Activities, if needed specify:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please identify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please identify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please identify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other (please identify):	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

SECTION 3: PARENTING TIME

Parties are encouraged to create a Parenting Plan that meets the needs of the child(ren) and individual needs of their family. If you have any unique issues, please identify them under “other” or provide an attachment to this Parenting Plan.

1. Weekday and Weekend Schedule during the School Year

The child(ren) will be in the care of **Petitioner**. List the days of the week and times.

The child(ren) will be in the care of **Respondent**. List the days of the week and times.

The child(ren) will be in the care of _____(name of **Other Party**).

Note: This party must be named in the case as the Petitioner, Respondent or an Intervenor to be included in this Parenting Plan. Do not list babysitters and day care providers as the Other Party.

List the days of the week and times.

Transportation and drop-off/pick-up arrangements will be as follows:

2. Summer Schedule

The weekday and weekend schedule above will apply for **all 12 calendar months** with no specific changes during the summer.

or

During the summer months, the child(ren) will be in the care of the **Petitioner**. List the days of the weeks and times.

During the summer months, the child(ren) will be in the care of the **Respondent**. List the days of the weeks and times.

The child(ren) will be in the care of _____ (name of **Other Party**).
Note: This party must be named in the case as the Petitioner, Respondent or an Intervenor to be included in this Parenting Plan. Do not list babysitters and day care providers as the Other Party.

List the days of the week and times.

Transportation and drop-off/pick-up arrangements will be as follows:

3. Holidays and Special Occasions

The following schedule will take priority over the schedules in **Sections 1 and 2**. Please check all that apply, place the name of the party with whom the children will be spending the holiday in the appropriate box (odd/even/all years), and indicate the time and place of exchange. Identify any unique situations under “Other”. If a box is not checked, the regular parenting time schedule will apply to that holiday event.

Event	Odd years	Even years	All Years	Time & Place of exchange
<input type="checkbox"/> Spring Break				
<input type="checkbox"/> Easter				
<input type="checkbox"/> Mother’s Day/Weekend				
<input type="checkbox"/> Memorial Day/Weekend				
<input type="checkbox"/> Father’s Day/Weekend				
<input type="checkbox"/> July 4 th				
<input type="checkbox"/> Labor Day/Weekend				
<input type="checkbox"/> Halloween				
<input type="checkbox"/> Thanksgiving Day/Break				
<input type="checkbox"/> Christmas Eve				
<input type="checkbox"/> Christmas Day				
<input type="checkbox"/> Week 1 of Winter Break				
<input type="checkbox"/> Week 2 of Winter Break				
<input type="checkbox"/> Children’s Birthdays				
<input type="checkbox"/> Other (Identify)				
<input type="checkbox"/> Other (Identify)				

Other parenting time arrangements:

4. **Number of Overnights:** Based upon the foregoing schedule(s), **Petitioner** will have _____ total overnights per year and **Respondent** will have _____ total overnights per year.

Note: These two numbers must equal 365.

5. **Telephone Access**

Each party may have reasonable telephone contact with the child(ren) during the child(ren)'s normal waking hours.

Other:

6. **Travel and Vacation Plans**

The parties agree that should either of them require out-of-state or any type of overnight travel with the child(ren), each party will inform the other party of such travel and vacation plans, including notice and contact information.

Other:

SECTION 4: RELOCATION

Relocation refers to moving the child(ren)'s residence so that the geographic ties between the child(ren) and the other party are substantially changed requiring a modification of decision-making and parenting time in an amended parenting plan.

Neither parent has current plans to relocate with the child(ren).

Petitioner Respondent Other Party is planning to relocate with the child(ren) to _____ (city) _____ (state) on _____ (date) and we have agreed to the following terms:

If either party's change of residence will significantly affect the children's contact with the other parent, the parties shall follow the following procedure, specifically:

1. A parent who intends to change residence shall provide written notice to the other parent.
2. If a party's change in residence will significantly affect the child(ren)'s contact with the other party, the party who intends to change residence shall, file a motion for amendment of the parenting plan and a proposed amended parenting plan with the court that adopted the residential schedule or the court to which jurisdiction or venue over the children has been transferred. The motion must be served personally or by certified mail on the other parent and served pursuant to the CSKT Rules of Practice on the parent's attorney of record, if the parent has an attorney of record, not less than 30 days before the proposed change in residence.

The notice pursuant to this subsection (2) is not sufficient unless it contains the following statement: *"The relocation of the children may be permitted and the proposed revised residential schedule may be ordered by the court without further proceedings unless within 10 days you file a response and alternate revised residential schedule with the court and serve your response on the person proposing the move and all other persons entitled by the court order to residential time or visitation with the children."*

3. The party who receives service of a motion to amend the parenting plan pursuant to this section has 10 days after service of the motion to file a response. If the party receiving notice objects to the proposed amended parenting plan, the responding party shall include an alternate proposed amended parenting plan with the response. The response must be served as provided for by the CSKT Rules of Practice on the party proposing to change residence or on the party's attorney of record if the party has an attorney of record.
4. If a party is properly served with a motion to amend the parenting plan pursuant to this section, failure to file a response within the 10-day period constitutes acceptance of the proposed amended parenting plan.
5. A person entitled to file an objection to the proposed relocation of the children may file the objection regardless of whether the person has received proper notice.
6. The parties may submit to the Court a written agreement/stipulation (with verified signatures of all parties) allowing one of the parties to relocate with the minor child(ren) together with a new proposed parenting plan which addresses how the parties intend to address all the parenting issues given the fact that one of the parties is now relocating with the minor child(ren).

SECTION 5: FINANCIAL OBLIGATIONS FOR THE BENEFIT OF THE CHILD(REN)

1. Child Support

If either party wishes to establish child support for the child(ren), then the party may request assistance from the Confederated Salish and Kootenai Tribes Child Support Enforcement Program (TCSEP) pursuant to CSKT Code, §3-1-306(1)(a). Upon this request, the TCSEP will

prepare a recommendation about the child support and health insurance obligation for this case. CSKT Code, §3-1-306(1)(d).

All child support agreements **must** be reviewed by the Court to determine if the agreement complies with the CSKT Child Support Guidelines and Schedule.

2. Medical, Dental, Vision, and Mental Health Insurance and Extraordinary/Out-of-Pocket Medical Expenses

Parent (name: _____) shall provide medical dental vision mental health insurance for the child(ren). If not all children, please identify the names of the child(ren) who will be receiving insurance: _____

and/or

Parent (name: _____) shall provide medical dental vision mental health insurance for the child(ren). If not all children, please identify the names of the child(ren) who will be receiving insurance: _____

and/or

Parent (name: _____) shall provide medical dental vision mental health insurance for the child(ren). If not all child(ren), please identify the names of the children who will be receiving insurance: _____

Extraordinary Medical Expenses are defined as uninsured expenses, including co-payments and deductible amounts in excess of \$250.00 per child per calendar year. The parties agree that extraordinary medical, dental, vision, or mental health expenses for the child(ren) shall be divided with the parent (name: _____) paying _____%, the parent (name: _____) paying _____%, and the Other Party paying _____%.

Other:

3. Childcare:

The cost for unreimbursed work-related childcare shall be paid as follows:

4. Per-Capita Payments:

Pursuant to CSKT law and applicable federal law, the child(ren)'s Tribal per capita dividends shall be available to the primary residential parent for the benefit of the child(ren).

5. IIM Accounts:

Pursuant to CSKT Tribal Resolution 01-218, the primary residential parent shall have the right to access the child(ren)'s IIM Trust Account for the benefit of the child(ren) via a Distribution Plan agreed to by both parents.

6. OPTIONAL-Extraordinary Expenses (Private schools, school/sport/extracurricular activities, etc.)

You may use this section to document any agreements made between the parties that are not required by law to be addressed such as private schools, extracurricular and recreational activities, automobile access or insurance, or any other agreements affecting the general welfare of the child(ren).

Note: Agreements made under this provision, if approved by the Court and made a part of the Decree or Order, become enforceable by the Court.

The parties agree to the following:

7. OPTIONAL - Post-Secondary Expenses (college, trade school, etc.)

You may use this section to document any agreements made between the parties that are not required by law to be addressed.

Post-secondary education expenses **cannot** be ordered by the Court without an agreement. If you agree that they should be paid by the parties, please indicate the terms of the agreement below.

NOTE: Agreements made under this provision, if approved by the Court and made a part of the Decree or Final Order, become enforceable by the Court.

Post-secondary education expenses for the child(ren) shall be divided with **Petitioner** paying _____% and **Respondent** paying _____% of every expense checked below. Post-secondary expenses include the following:

Tuition (indicate any restrictions or maximum monetary amounts)_____

Room and Board

Books

- Fees
- Travel
- Other: _____

SECTION 6: CHILD TAX EXEMPTION

Only one party may claim a deduction for each child on his/her income tax return. Both parties agree to prepare appropriate IRS forms, for example, Form 8332 “Release of Claim to Exemption for Child of Divorced or Separated Parents” IRS link to forms:

<http://www.irs.gov/formspubs/index.html>

“P” = Petitioner “R” = Respondent “O” = Other party

Full Name of Child	Deduction to be claimed every year by:			Deduction to be claimed during odd years			Deduction to be claimed during even years		
	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O
	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O
	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O
	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O
	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O	<input type="checkbox"/> P	<input type="checkbox"/> R	<input type="checkbox"/> O

- Other: _____

SECTION 7: OTHER TERMS

- If the parties cannot reach an agreement in the future on any issues involving the child(ren), they agree to enter into mediation decision-maker and shall equally share in the cost, if any.
- The parties will exchange financial information on an annual basis, for example, income, verification of insurance and its costs.
- Identify below any issues or agreements not already identified in this agreement.

Minor changes may be made at any time if both parties agree to the changes. A written agreement to modify child support, the primary caretaking party, or other substantial changes to the parenting plan should be filed with the Court along with a proposed order for the Court to approve the modification.

Please re-read this document carefully to make sure it accurately reflects your entire agreement. Items agreed upon outside of this document may not be enforceable.

-
- By checking this box, I am acknowledging I am filling in the blanks and not changing anything else on the form.
- By checking this box, I am acknowledging that I have made a change to the original content of this form.
-

RESPECTFULLY SUBMITTED this ____ day of _____, 20__ by:

Signature of: Petitioner Respondent
 Attorney/Advocate for _____

Signature of: Petitioner Respondent
 Attorney/Advocate for _____

IF ONLY ONE PARTY SUBMITS THE DOCUMENT, COMPLETE THE CERTIFICATE OF SERVICE BELOW

CERTIFICATE OF MAILING

I, _____, do hereby certify that a true and accurate copy of the **PROPOSED PARENTING PLAN** was filed with the Court and simultaneously mailed to the opposing parties on this ____ day of _____, 20__, at the addresses given below.

Signature