

**“PACKET A”**

**USE “PACKET A” INSTRUCTIONS AND  
FORMS WHEN YOU WANT TO OBTAIN  
A CUSTODY ORDER WITHOUT THE  
AGREEMENT OF THE OTHER PARTY.**

IT IS STRONGLY RECOMMENDED THAT  
YOU CONTACT ATTORNEY  
CONNECTIONS AT (717) 854-8755 FOR A  
LOW-COST INITIAL CONSULTATION  
WITH AN ATTORNEY BEFORE  
PROCEEDING FURTHER.

The information in this packet is not a substitute for professional legal advice. The Court assumes no responsibility and accepts no liability for actions taken by users of these documents, including reliance on their content.

## **PACKET A – Contents and Checklist**

### **INSTRUCTIONS**

#### **STEPS AND FORMS (If you and the other party do NOT have a custody agreement)**

##### **Step 1 and 2 Forms:**

**Conciliation Scheduling Order (English), Conciliation Scheduling Order (Spanish)**

**Custody Complaint**

**Criminal Record / Abuse History Verification (2)**

**Entry of Appearance as a Self-Represented Party**

**Conciliation Conference Memorandum**

##### **Step 3 Forms:**

**\_\_\_\_ Proof of Service Forms (only one needed)**

**Acceptance of Service, or**

**Affidavit of Personal Service, or**

**Affidavit of Service by Certified Mail & 1st Class Mail**

##### **Step 4 Forms:**

**Memorandum for Custody Pre-Trial Conference**

**Parenting Plan (if directed by the court)**

## **PACKET A – INSTRUCTIONS**

Use Packet A Forms and instructions if there is no existing custody order and you want to obtain a custody order with or without the agreement of the other party. In addition, this packet is **NOT** appropriate for you if **ANY** of the following pertain to you:

1. The child of whom you seek custody has not lived in Pennsylvania with a parent or a person acting as a parent for at least six consecutive months immediately before the start of the custody proceeding;
2. You do not have standing to bring a custody action (see the **IMPORTANT ISSUES IN CUSTODY** Section);
3. You plan to raise issues of abuse, neglect, unfitness, mental illness, psychological problems, criminal convictions, criminal charges and/or any other complex issues; or
4. You are not the child's parent or the other party is not the child's parent. These instructions and forms are designed for custody actions between parents only.

## **GENERAL CONSIDERATIONS**

The following procedural steps will occur after the Custody Complaint is filed:

**Conciliation Conference.** At the same time that the custody complaint is filed you are required to file a conciliation scheduling order so that a conciliation conference will be scheduled to occur about two to three weeks from the date the complaint is filed. The conciliation conference is held before a conciliator, who is an attorney in York, Pennsylvania, and has been appointed by the Court to hear the case.

The conciliation will be held at the York County Judicial Center (usually on the fourth floor in Hearing Room #7) and will last approximately one hour. In attendance are the parents, their attorneys (if they have attorneys) and the conciliator. No one else is permitted into the conference. Testimony is not taken at the conference and witnesses are not permitted. If a parent is also a minor, he or she must have a legal guardian or parent present.

Children over the age of seven are required to be present, but they will wait outside the conference room until the conciliator is ready to speak with them. The conciliator does not always speak with the children, but if he or she does speak with the children, neither the parties nor their attorneys are present. You should arrange for daycare, or someone to watch your children outside the conference, while you attend the conference. Please note that neither the conciliator nor the judge is bound by the child's preference. If the parties are able to reach an agreement at the conciliation conference, the conciliator will dictate that

agreement and the parties will receive a copy of the agreement, signed by the judge, in about three weeks. The case will then be over, unless someone files a Petition to Modify or a Petition for Contempt at some point in the future. The conciliator is not a judge, but, if the parties are unable to reach an agreement at the conciliation, the conciliator will prepare an interim custody order that will be forwarded to a judge for signature.

**Custody Workshop.** Parties who attend a conciliation conference are required to attend a Custody Workshop generally within sixty (60) days of the conciliation. Sometimes the Custody Workshop is not required if you reach an agreement with the other party at conciliation. The Custody Workshop is currently being offered by Family-Child Resources of York. FCR's address is 3995 East Market Street, York, PA 17402-2773 and the phone number is 717-757-1227. This workshop is four hours long and there is a fee, which each party must pay, to attend. The parties do not have to attend the workshop together. There are workshops offered at night and on the weekends. Once completed, a party will receive a certificate, which must be filed with the Court. If a party fails to attend the workshop, or file the certificate, the judge may find that person in contempt of court.

**Mediation.** If the parties are unable to reach an agreement at the conciliation, the parties will be required to attend one, two-hour mediation session. The cost of the mediation session is approximately \$135.00 per person, and no attorneys are present during the mediation. If you have been approved to proceed *in forma pauperis* (IFP), be sure to remind the conciliator so that the fee is waived for you for mediation. The conciliator will provide you with the name and telephone number of a mediator and it is your responsibility to schedule a mediation session.

**Home Studies and other Evaluations.** If the parties are unable to reach an agreement at mediation, the case will proceed to trial. The parties are currently given fifteen (15) days to request a home study of their home or the other party's home (currently this costs about \$400), or request psychological evaluations (which can cost an average of between \$2,000 to \$8,000). Other types of evaluations, which can be requested, include drug and alcohol evaluations, psychiatric evaluations, or medical evaluations. The party requesting the evaluation will be directed to pay the cost of the evaluation.

**Pre-Trial Conference and Trial.** The parties will also receive an order scheduling a pre-trial conference before the custody judge, which requires the parties to submit a pre-trial conference memorandum on or before a deadline set in the order. The pre-trial conference is usually about six to eight weeks after the conciliation conference. The pre-trial memorandum is filed with the Prothonotary and served on the opposing party or counsel. In the pre-trial memorandum, the parties will exchange witness lists and exhibit lists, although they have some additional time after the pre-trial conference to supplement those lists. The judge will also direct that each party prepare and file a parenting plan. After filing the pre-

trial memorandum and parenting plan, a copy of each should be delivered to the Court Administrator's office for use by the Judge.

During the pre-trial conference the judge speaks with the parties and counsel (if applicable). The judge will try to resolve the custody issue at the pre-trial conference. At the conclusion of the Pretrial Conference, if the judge is unable to resolve the custody issue, the judge will issue a Custody Pretrial Order.

Most trials last about one day, but if there are experts, or complicated issues, a trial can last several days.

**STEPS TO BE TAKEN TO OBTAIN A CUSTODY ORDER  
WITHOUT THE OTHER PARTY'S AGREEMENT.**

(If the other party is in agreement with your proposed custody schedule, proceed to the “Alternative Steps” section below)

**Step 1. Starting the Action.**

Complete the Conciliation Scheduling Order, the Complaint for Custody, the Criminal /Abuse History Verification, the Entry of Appearance as a Self-Represented Party, and the Conciliation Conference Memorandum.

**YOU MUST ATTACH A “CONCILIATION SCHEDULING ORDER” TO YOUR COMPLAINT. THIS ORDER MUST BE PROVIDED IN ENGLISH AND SPANISH UNDER YORK COUNTY’S RULES OF CIVIL PROCEDURE, REGARDLESS OF ANY PARTY’S PRIMARY LANGUAGE.**

**A. Completing the Caption.**

1. The caption is the top part of the first page of the Conciliation Scheduling Order, the Spanish Conciliation Scheduling Order, Complaint for Custody and the Conciliation Conference Memorandum. The names of the parties, the docket number (which will be assigned by the Prothonotary when the document is filed), the type of document and the court's name are contained in the caption.
2. You are “the Plaintiff” since you are filing this action and there is no existing case. Print your full, legal name, including middle initial, above the word “Plaintiff” in the caption of the Conciliation Scheduling Order, the Complaint and the Conciliation Conference Memorandum. You are also the “Petitioner,” so mark the box next to “Petitioner.”
3. The other parent is “the Defendant”. Print the other parent’s full, legal name, including middle initial, above the word “Defendant” in the caption of the Conciliation Scheduling Order, the Complaint and the Conciliation Conference Memorandum.

**NOTE:**

It is recommended that you complete these forms online. If the judge cannot read your handwriting, he/she may deny your request, discard your forms, or take no action at all. The online forms are fillable and can be printed after you complete them.

**YOU MUST COMPLETE THE CAPTION ON EVERY FORM YOU FILE. THE DOCKET NUMBER WILL BE PROVIDED TO YOU BY THE PROTHONOTARY’S OFFICE WHEN YOU FILE THE CONCILIATION SCHEDULING ORDER, THE COMPLAINT FOR CUSTODY, AND THE CUSTODY CONCILIATION MEMORANDUM. YOU MUST FILL IN THE DOCKET NUMBER IN THE CAPTION OF ALL FORMS THAT YOU FILE AFTER THE ABOVE DOCUMENTS ARE FILED.**

## **B. Completing the Conciliation Scheduling Order.**

1. In the blank following “Conciliator Previously Assigned to This Case” insert “Not Applicable”. After the word “You” insert the other parent’s full name and after the words “have been sued in Court to” you must mark the box next to the kind of custody relief you are seeking.  
Since using this “PACKET A” means there is no existing custody order, and you want an order for custody, partial custody, or visitation of the child(ren), mark the first box. Complete the caption on the Spanish version, regardless of either parent’s primary language.
2. Do not insert anything in the blanks located in paragraphs 1 and 2; the Court Administrator’s Office will fill in these blanks.

**NOTE:** You will not get a date for the conciliation conference until you have either paid the filing fee (show the receipt from the Prothonotary to the Court Administrator) or you have been approved for IFP status (show the order approving your petition to proceed *In Forma Pauperis* to the Court Administrator).

3. Although there are no other areas of this form that need to be filled in, it is important that you read the remainder of the form carefully, understand it, and comply with it.

## **C. Completing the Complaint for Custody**

1. In paragraph 1, fill in your full legal name, including the middle initial, and your full street address (street, number, route, box number, town, county, state and zip code) where indicated. If you receive your mail at a post office box, insert the P.O. Box address at the end of the paragraph as follows: “The Plaintiff’s mailing address is: (insert full mailing address including P.O. Box number).”
2. In paragraph 2, fill in the other parent’s full legal name, including his/her middle initial and his/her full street address (street, number, route, box number, town, county, state and zip code), where indicated. If the other parent receives his/her mail at a post office box, insert the P.O. Box address at the end of the paragraph as follows: “The Defendant’s mailing address is: (insert full mailing address including P.O. Box number).”
3. In paragraph 3, first mark the type of custody you are asking for (refer to the Custody Introduction for a list of the types of custody & definitions), then fill in the names, addresses and years of birth for every child that you want included in the custody order.
4. In paragraph 4, mark whether the child(ren) was/were born in or out of wedlock and insert where and with whom the child(ren) has/have resided for the past five years. For children under the age of five provide the information from the date of birth to present.

5. In paragraph 5, mark whether the mother is the Plaintiff or the Defendant and whether she is married, divorced, single, or separated.
6. In paragraph 6, mark whether the father is the Plaintiff or the Defendant and whether he is married, divorced, single, or separated.
7. In paragraph 7, insert your relationship to the child(ren) (mother or father) and the people residing with you and their relationship to you (boyfriend, girlfriend, son, daughter, etc.).
8. In paragraph 8, insert the relationship of the Defendant to the child(ren) (mother or father) and the people residing with the Defendant and their relationship to the Defendant (boyfriend, girlfriend, son, daughter, etc.).
9. In paragraph 9, indicate whether you have or have not participated in other litigation (legal action or court case) concerning custody of the child(ren). If you have, insert the court, term and number of the other proceeding and its relationship to this action. Indicate whether or not you have information of a pending custody proceeding concerning the child(ren) in another Pennsylvania county or in another state or country. If so, provide the court, term and number of the custody proceeding and its relationship to this action. Finally, indicate whether or not you know of a person, other than you or the Defendant, who had custody of or claims to have rights of custody to the child(ren). Provide the name and address of any such person.
10. In paragraph 10, provide a summary of the reasons why your custody requests are in the best interest of the child(ren).
11. In paragraph 11, you are representing that each parent whose parental rights to the child(ren) have not been terminated have been named as parties to this custody action. Insert the names of any other persons you know of that have a claim to custody of the children, their address and the basis of the claim. You have a responsibility to provide any such person with notice of your custody proceeding.

**Sign and date.** Sign and date the Complaint where indicated. Print your name, address, and telephone number under your signature.

#### **D. Completing the Criminal Record / Abuse History Verification**

You must file and serve with any petition for modification, or complaint, a verification regarding any criminal or abuse history of the petitioner (you) and anyone living in the petitioner's household. The petitioner (you) must also attach a blank verification form to the complaint or petition served upon the respondent (other party/person in custody case). In other words, you must give a blank copy of the Criminal Record / Abuse History Verification to the other party / parent with the copy of the custody complaint or petition.

You must fill out, sign, and submit the Criminal Record/Abuse History Verification even if nothing on the list applies to you.

Complete the Caption at the top of the page, just as you did with the other forms.

Write your name in the first blank.

Question #1 indicates that you are answering each of the questions for **YOU AND FOR EVERY ADULT MEMBER OF YOUR HOUSEHOLD.**

1. If anyone in your household has been convicted of or has charges pending for any of the listed crimes, check the 1<sup>st</sup> box, then check the box to indicate whether it was you or a household member. Then list the date of the conviction/guilty plea/no contest/pending charges. Then write what the sentence was. Do not check any boxes or write anything if you and no one in your household has been charged with or convicted of the crime listed.
2. In Question #2, you must indicate any history of violence or abusive conduct for you or any member of your household. Indicate whether you or any adult member of your household had a finding of abuse or involvement with a Children & Youth Agency or any similar agency in Pennsylvania or any other jurisdiction. Also check the correct box if you or any adult member of your household had any abusive conduct with a PFA (Protection from Abuse) in Pennsylvania or any other jurisdiction. In the lines provided, state the date and details of the child abuse and the jurisdiction.
3. List any treatment or evaluations or counseling you or any member of your household participated in after conviction or finding of abuse.
4. In the first section of #4, list the names, birthdates, and relationships to the children of the people you live with who have a conviction on the list.

In the second section of #4, list the names and ages of all the people who live with you, **whether they have any convictions or charges or not.**

5. In #5, list any criminal or abuse history that you know about the other party or the members of the other party's household.
6. List any services provided by a child welfare agency to anyone in your household.

Sign the form and print your name beneath your signature. By signing, you are swearing under penalty of law that everything in this form is true to the best of your knowledge.

Additionally, both parties shall file & serve updated verifications 5 days prior to trial.

#### **E. Completing the Entry of Appearance as a Self-Represented Party**

1. Complete the caption as you did on the other forms. In Paragraph #1, print your name and mark whether you are the plaintiff or the defendant in this case.
2. If you previously had an attorney in this case but are now choosing to represent yourself, you must complete one of the two parts of Paragraph #2. Then move on to Paragraph #3.
3. If you have never had an attorney in this case, then skip to Paragraph #3 and complete your current mailing address and other requested information.
4. Sign and date the form.
5. You must provide a copy of this form to all other attorneys involved in the case and to any other self-represented parties.
6. You must file this Entry of Appearance as a Self-Represented Party form with your Conciliation Conference Scheduling Order, Custody Complaint, Criminal Record/Abuse History Verification, and Conciliation Conference Memorandum.
7. You must file a new form EVERY TIME YOUR ADDRESS CHANGES.

#### **F. Completing the Conciliation Conference Memorandum.**

After the words “Submitted By” insert your name.

1. In Paragraph #1, after “Party is” insert either “Plaintiff-Mother” or “Plaintiff-Father”, whichever applies.
2. In Paragraph #2, insert the names and years of birth of the children involved in the custody action.

3. In Paragraph #3, check the block(s) that best describe the type of custody you are requesting. Choose **1 type of Physical & 1 Type of Legal Custody**. If you are asking for something other than the listed choices, insert the relief you are requesting after the word “Other.”
4. In Paragraph #4, summarize the current custody situation.
5. In Paragraph #5, insert the number of months or years that the current custody situation has been in effect.
6. In Paragraph #6, answer “yes” if either of the parents has prevented the other parent from having contact with the child and “no” if that is not the case. If you answered “yes”, explain the circumstances. By way of example only, if you answered that you have prevented contact because the other parent showed up for custody visibly drunk and you were concerned for your child’s safety, insert that explanation in the space provided.
7. In Paragraph #7, write the answer “yes” if you allege that the other parent is unfit, “no” if you believe the other parent is fit, or “reserved” if you do not know if the other parent is fit and you want to save the issue for the hearing.
8. In Paragraph #8, write the answer “yes” if you allege that the other parent’s home environment is improper, “no” if you believe the other parent’s home environment is proper, or “reserved” if you do not know if the other parent’s home environment is proper and you want to save the issue for the hearing.
9. In Paragraph #9, describe any other issues that you want to present to the court.
10. In Paragraph #10, write the answer “yes” if you plan to raise emotional or psychological problems of the children or others involved, “no” if you do not plan to raise emotional or psychological problems of the children or others involved, or “reserved” if you do not know yet if you will raise emotional or psychological problems of the children or others involved and you want to save the issue for the hearing.
11. In Paragraph #11, write the answer “yes” if you plan to request a psychological evaluation of the children and others involved, “no” if you do not plan to request a psychological evaluation of the children and others involved, or “reserved” if you do not know yet if you will request a psychological evaluation of the children and others involved and you want to save the issue for the hearing. **Note: If you request psychological evaluations, you will be responsible for paying the cost of the evaluations which could be several thousands of dollars.**
12. In Paragraph #12, write the answer “yes” if you plan to request a psychological evaluation of the children and others involved and you will agree to the appointment of one neutral psychologist to be used by you and the other party or “no” if you plan to request a psychological evaluation of the children and others

involved but will not agree to the appointment of one neutral psychologist to be used by you and the other party. **Note: If you request psychological evaluations and agree to the appointment of one neutral psychologist to be used by you and the other party, you will be responsible for paying one-half of the cost of the evaluation which could be several thousands of dollars.**

13. In Paragraph #13, insert the number of days it will take you to present your side of the case if the case does not settle and goes to a hearing. **Note: In many cases the court will not schedule more than a half-day to a day for a hearing.**
14. If the matter does not settle and proceeds to a hearing, you may choose to call witnesses at that hearing. You must list here any witnesses that you plan to call. You may have a chance to change this list at a later date, closer to the Pre-Trial Conference. In Paragraph #14, insert the names & addresses of any factual witnesses you plan to call if there is a hearing.
15. In Paragraph #15, insert the names & addresses of any expert witnesses you plan to call.
16. In paragraph 16, write the answer “yes” if you plan to request that home studies of your home and the other parent’s home be completed, “no” if you do not plan to request that home studies of your home and the other parent’s home be completed, or “reserved” if you do not know yet if you will request that home studies of your home and the other parent’s home be completed and you want to save the issue for the hearing. **Note: If you request home studies, you will be responsible for paying the cost of them which could be several hundreds of dollars.**
17. In Paragraph # 17, insert any other relevant information that you want the Custody Conciliator to know. By way of example, if you are concerned about the other parent’s method of discipline, you might want to describe your concerns in the space provided.
18. Sign this form, print your name, address and telephone number in the spaces provided.

**Step 2. Filing the Conciliation Scheduling Order, the Complaint for Custody, the Criminal/Abuse History Verification, the Entry of Appearance as a Self-Represented Party, and the Conciliation Conference Memorandum.**

- A. Make two copies of the entire completed Conciliation Scheduling Order, Complaint for Custody, the Conciliation Conference Memorandum, the Criminal/Abuse History Verification, and the Entry of Appearance as a Self-Represented Party.

**Note:** If there are more than 2 parties involved in the case (for example multiple defendants listed in the caption), you will need to make enough copies for each party.

- B. Take the original and the copies to the York County Prothonotary's Office located on the first floor of the York County Judicial Center along with the filing fee in cash, certified check, money order or traveler's checks payable to the "Prothonotary of York County." You may use a credit card, for which you will be charged an additional fee. The amount of the filing fee can be obtained by calling the Prothonotary's office at 717-771-9611. **IF YOU CANNOT AFFORD THE FILING FEE AND MEET CERTAIN FINANCIAL GUIDELINES, YOU CAN REQUEST THAT THE COURT PERMIT YOU TO PROCEED "IN FORMA PAUPERIS" MEANING YOU WILL NOT HAVE TO PAY THE FILING FEE. TO REQUEST IN FORMA PAUPERIS STATUS GO TO THE IN FORMA PAUPERIS PACKET AND FOLLOW THE INSTRUCTIONS.**
- C. The Prothonotary's staff will place a docket number on each of the documents. The Prothonotary's staff will date-stamp each document, with the exception of the Conciliation Scheduling Order, and return the Conciliation Scheduling Order and the date-stamped copies of the other forms to you. The Prothonotary's staff will provide you with a receipt showing that you have paid the filing fee.
- D. Immediately take the receipt, Conciliation Scheduling Order and the other date-stamped forms to the District Court Administrator's office located on the fourth floor of the York County Judicial Center.
- E. The District Court Administrator's Office will fill in the Conciliation Scheduling Order with the name of your conciliator and the date, time and location of the conciliation conference.
- F. Immediately return to the Prothonotary's Office with the completed Conciliation Scheduling Order and the copies of the other date-stamped forms. The Prothonotary's Office will date-stamp the filled in Conciliation Scheduling Order, keep the original, and return the copies of the date-stamped Conciliation Scheduling Order to you.
- G. One of the date-stamped copies of each document is for you to keep for your records. **Take special note of the date, time and place of the conciliation conference since you must attend the conference.** One of the date-stamped copies of each of the documents must be served on the Defendant (the other party) prior to the Conciliation Conference. **If service is not completed prior to the Conciliation Conference, the Conciliation Conference will be cancelled or rescheduled, and you may be required to pay an additional fee. Also, if the Complaint for Custody is not served within thirty days of the filing of the Complaint, you will have to reinstate the Complaint before you will be permitted to proceed.**

**Step 3. Serving the Conciliation Scheduling Order, the Complaint for Custody, the Criminal / Abuse History Verification (plus 1 blank copy), the Entry of Appearance as a Self-Represented Party, and the Conciliation Conference Memorandum.**

“Service” means that the Defendant received the Conciliation Scheduling Order, the Complaint for Custody, the Criminal Record/Abuse History Verification, the Entry of Appearance as a Self-Represented Party, and the Conciliation Conference Memorandum within thirty days of the filing of the Complaint. Service can be accomplished in any one of the following ways:

- A. Acceptance of Service.** If you are on cordial (good) terms with the other parent, an easy way to accomplish service is to mail or hand deliver the Conciliation Scheduling Order, the Complaint for Custody, 1 completed + a blank copy of the Criminal Record /Abuse History Verification, the Entry of Appearance as a Self-Represented Party, and the Conciliation Conference Memorandum to the other parent and have him or her, **in the presence of a notary or the Prothonotary**, sign, date, and return to you the Acceptance of Service Form. Before sending or handing the Acceptance of Service Form to the other parent, fill in the caption, including the docket number and the date the Complaint was filed. Instruct the other parent to fill in the date he/she received the Conciliation Scheduling Order, the Complaint for Custody, the Criminal/Abuse History Verification, the Entry of Appearance as a Self-Represented Party, and the Conciliation Conference Memorandum, his/her address and telephone number when signing the document, and to have his/her signature notarized. Once the other parent/party has returned the signed form to you, make a copy and take the original form and the copy to the Prothonotary’s Office for filing. The Prothonotary’s staff will date-stamp the original and copy, keep the original and return the copy to you for your records.
- B. Personal Service.** Service can also be accomplished by an adult, other than you, personally handing a date-stamped copy of the Conciliation Scheduling Order, the Complaint for Custody, the Conciliation Conference Memorandum, the Entry of Appearance as a Self-Represented Party, and the Criminal/Abuse History Verification (plus a blank copy) to the other parent. The adult who handed the papers to the other parent must fill out and sign the Affidavit of Personal Service after you have filled in the caption and docket number on the Affidavit of Personal Service. Make a copy of the completed Affidavit of Personal Service and take the original and the copy to the Prothonotary’s Office for filing. The Prothonotary’s staff will date-stamp the original and copy, keep the original and return the copy to you for your records.
- C. Service by Mail-Both Regular & Certified Mail.** Service of the Conciliation Scheduling Order, the Complaint for Custody, the Criminal/Abuse History Verification (plus a blank copy), the Entry of Appearance as a Self-Represented Party, and the Conciliation Conference Memorandum can be accomplished by sending the extra date-stamped copy of each to the Respondent **by certified mail, return receipt requested, restricted delivery AND by regular first class mail**. **The Respondent is the only person who is permitted to sign for the delivery of the Conciliation Scheduling Order, the Complaint, the Criminal/Abuse History Verification, the Entry of Appearance as a Self-Represented Party, & the Conciliation Conference Memorandum. To accomplish service by Mail, do the following:**
1. Prepare 2 envelopes with the other parent’s name and address, using your own address as the return address.

2. Insert a date-stamped copy of the Conciliation Scheduling Order, the Complaint for Custody, the Conciliation Conference Memorandum, the Entry of Appearance as a Self-Represented Party, and the Criminal/Abuse History Verification (plus the extra blank copy) into each envelope and seal.
3. Print the words “Restricted Delivery” on the lower left hand corner of **only ONE** of the envelopes. It is best to do this with red ink.
4. The other envelope just needs to be mailed regular first class mail with a stamp or stamps—be sure you put enough postage on the envelope.
5. Take the envelopes to the Post Office. Mail the regular one and tell the postal worker that you want to send the other “**certified mail, return receipt requested, restricted delivery.**”
6. The postal worker will help fill out the “green card” & attach it to your envelope.
7. The postal worker will provide you with a receipt after you have paid the fee for mailing. **MAKE SURE YOU KEEP THIS RECEIPT.** You will need to attach it to your Affidavit of Service by Certified Mail (See # 8, below).
8. When the green card is returned to you, completely fill out and sign the Affidavit of Service by Certified Mail and attach the receipt and the green card to it. Make a copy of the completed Affidavit of Service by Certified Mail and take the original and the copy to the Prothonotary’s Office for filing. The Prothonotary’s staff will date-stamp the original and copy, keep the original and return the copy to you for your records.

**D. Service by York County Sheriff.** The most certain way to ensure service is to pay the York County Sheriff’s Office to deliver the papers to the other party.

Take a date-stamped copy of the Conciliation Scheduling Order, the Petition to Modify Custody Order, the Conciliation Conference Memorandum, the Entry of Appearance of a Self-Represented Party, the Criminal Record/Abuse History Verification, and a blank copy of the Criminal/Abuse History Verification to the Sheriff’s Office located on the first floor of the York County Judicial Center. You will need to pay the Sheriff’s fee in advance. After the Sheriff has served the Conciliation Scheduling Order, the Complaint for Custody and the Conciliation Conference Memorandum, he/she will file his/her affidavit of service at the Prothonotary’s Office.

**Step 4. Preparing the Memorandum for Custody Pre-Trial Conference and the Parenting Plan if an agreement is not reached at the conciliation conference or through mediation.**

- A. If you and the other parent are unable to reach a custody agreement at the Custody Conciliation, you will receive an Order Scheduling a Pre-Trial Custody Conference. That Order will also direct you to prepare and file, by a deadline, a Memorandum for Custody Pre-Trial Conference and a Parenting Plan. Read the Judge's Pre-Trial Order

very carefully & be sure to pay attention to the dates. **It is very important that you comply with the deadlines contained in this Order.**

- B.** After inserting the caption of the Memorandum for Custody Pre-Trial Conference, answer and fill in each and every item on the Memorandum. If an item is not applicable to your case, insert “not applicable”. Most of the items on the Memorandum are self-explanatory, however, note the following:
- 1. Admissions From Pleadings to be Made Part of Record.** If either party has admitted in the pleadings to an important fact, such as that he or she has a drug or alcohol problem, insert that "admission" here.
  - 2. Stipulation of Parties.** Insert facts that are agreed on by the parties here such as, the parents’ years of birth, addresses, places of employment, the children’s dates of birth, addresses, churches attended, schools attended, and extra-curricular activities.
  - 3. Witnesses to be Called.** It is very important that you list the name and address of every witness you intend to call at the custody hearing along with a summary of the subject of each witness’ testimony. **Your failure to fully comply with this portion of the Memorandum may result in the Court not allowing one or more of your witnesses to testify.**
- C.** The Court Order will direct you and the other parent to attempt to prepare and file the Parenting Plan together. If you and the other parent are not able to prepare the Parenting Plan together, each of you will be required to prepare and file a Parenting Plan. By having you answer a series of self-explanatory questions, the Parenting Plan will provide the Court with a detailed statement of what type of custody order you and the other parent are requesting of the Court. After inserting the caption in the Parenting Plan, answer and fill in each and every item on the Parenting Plan.
- D.** After you have completed the Parenting Plan and the Memorandum for Custody Pre-Trial Conference, make four copies of each. Take the original and the copies to the Prothonotary’s Office for filing. The Prothonotary’s staff will date stamp the originals and the copies. The Prothonotary’s staff will retain the originals and return the copies to you. You must provide the other parent with one of each of the time stamped copies, retain one of each of the time stamped copies for your records, and forward one of each of the time stamped copies to the chambers of the Judge conducting the Pre-Trial Conference.

### **Step 5. Attending the Pre-Trial Custody Conference and the Custody Hearing.**

It is important that you appear for the Pre-Trial Custody Conference at the date and time scheduled. At that Conference, the Judge will speak with you and the other parent. If you and

the other parent are still unable to reach a custody agreement after speaking with the Judge, the Judge will issue an Order scheduling your case for trial.

It is your responsibility to ensure that you and all of your witnesses are available for the hearing when it occurs. In preparing for your hearing, refer back to the “Important Issues in Custody” contained in the Introduction to the Custody Packets for the factors the Court will be looking at in making its custody determination.

After the hearing, you will receive a copy of the Judge’s Custody Order in the mail, once he has prepared it. If you wish to appeal the Order to the Pennsylvania Superior Court there are various notice requirements, briefing schedules and other deadlines that must be obeyed. These instructions do not include the instructions for an appeal. If you want to appeal the Judge’s Order, it is recommended that you seek legal counsel. Otherwise, it is up to you to ascertain and follow the steps necessary to appeal the Order.

**ALTERNATIVE STEPS**  
**(IF YOU AND THE OTHER PARENT HAVE A CUSTODY AGREEMENT).**

If you and the other parent have agreed to a custody arrangement, there is no need for you and the other parent to attend a Conciliation conference, a mediation, or a hearing. The Court will incorporate your agreement into a Custody Order if you complete the steps for completing and submitting the Custody Stipulation and Agreement and Order.

**Choose the appropriate form from the CUSTODY AGREEMENT REACHED Custody packets. If only one child is subject to the custody order, utilize the form for one child and if more than one child is subject to the custody order, utilize the form for multiple children.**

**Complete the Stipulation and Agreement Forms.**

Fill in the various provisions of these documents until they accurately reflect the custody agreement you have reached with the other parent. Clearly indicate your selections in each numbered section. Both parents must also complete a Criminal Record & Abuse History Verification for themselves and any adult household members. After the forms are completed and signed and initialed by both parties, take the original & copies to the York County Court Administrator’s Office located on the fourth floor of the York County Judicial Center. The Court Administrator will forward the documents to a Judge for his signature on the Order. The Prothonotary's Office will telephone you when the Judge has signed the Order. If you do not receive a call from the Prothonotary within two weeks, check back with the Court Administrator to find out if your Order has been signed by the Judge.

After the Order is signed by the judge, you must pick up the signed Order and the copies from the Prothonotary’s Office located on the first floor of the York County Judicial Center. You will have to pay the filing fee at that time.

These forms with detailed instructions are available in the Court Self-Help Center or online at:

<http://yorkcountypa.gov/courts-criminal-justice/self-help-center/forms-packets.html>

**Another note about the Pre-Trial Conference Memorandum:**

Pursuant to Pennsylvania Rule of Civil Procedure 01915.4-4, which addresses Pre-Trial Procedure, the pre-trial conference memorandum must be filed within the deadline ordered by the Judge, and it must contain information about any witnesses you plan to call and any exhibits you plan to enter.

A portion of that rule is quoted below:

(b) Not later than five days prior to the pre-trial conference, each party shall serve a pre-trial statement upon the court and the other party or counsel of record. The pre-trial statement shall include the following matters, together with any additional information required by special order of the court:

- (1) the name and address of each expert whom the party intends to call at trial as a witness;
- (2) the name and address of each witness the party intends to call at trial, the relationship of that witness to the party, and a statement by the party or the party's counsel that he or she has communicated with each listed witness; and
- (3) a proposed order setting forth the custody schedule requested by the party.

In addition to the above items included in the pre-trial statement, any reports of experts and other proposed exhibits shall be included as part of the pre-trial statement served upon the other party or opposing counsel, but not included with the pre-trial statement served upon the court.

IN THE COURT OF COMMON PLEAS OF YORK COUNTY, PENNSYLVANIA

No. \_\_\_\_\_ -FC - \_\_\_\_\_ -03

\_\_\_\_\_  
Plaintiff

Petitioner

Respondent

vs.

Civil Action – Law

\_\_\_\_\_  
Defendant

Petitioner

Respondent

Custody

**CONCILIATION SCHEDULING ORDER**

Conciliator Previously Assigned to this case: \_\_\_\_\_

You, \_\_\_\_\_, have been sued in court to  
(Respondent's Name)

obtain any form of custody

modify an existing custody order

address a petition for contempt alleging you have willfully disobeyed an existing custody order. If you wish to defend against the claim set forth in the following pages, you may but are not required to file in writing with the court your defenses or objections. Whether or not you file in writing with the court your defenses or objections, you must appear as ordered below.

It is hereby Ordered and Directed:

1. \_\_\_\_\_, Esquire, is hereby assigned to conduct a Conciliation Conference.
2. A Conciliation Conference will be held before the assigned Conciliator on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ .M., in Hearing Room 7, 4<sup>th</sup> Floor, York County Judicial Center, 45 North George Street, York, Pennsylvania, 17401. The anticipated length of the Conciliation Conference is one hour.
3. The parties shall appear in person at the Conciliation Conference and shall bring with them all CHILDREN AGE SEVEN (7) AND OLDER.

INCARCERATED PARTY: If you are incarcerated and wish to participate by speakerphone, you may do so by contacting the Conciliator at 717-771-3289 at the above designated date and time.

INTERPRETER NEEDED: If you need an interpreter, you may request one by contacting the Administrative Office of York County Courts at 717-771-9234. Please contact the office as soon as possible, but no less than three days before the conference. You will be required to provide the date and time of the scheduled conference along with the name of the party and language requiring interpretation.

4. OBTAIN CUSTODY or MODIFY AN EXISTING CUSTODY ORDER: If you fail to appear as provided by this Order, an Order for custody, partial custody, or visitation may be entered against you. If you fail to bring the child(ren), the Court may issue a warrant for your arrest.

CONTEMPT: IF YOU DO NOT APPEAR IN PERSON, THE COURT MAY ISSUE A WARRANT FOR YOUR ARREST. If the court finds that you have willfully failed to comply with its order, you may be found in contempt of court and committed to jail, fined or both.

5. The parties and their counsel, if applicable, are hereby directed to engage in meaningful negotiations to resolve this matter prior to the Conciliation Conference.
6. You have the right to be represented by an attorney who may attend the Conciliation Conference with you. If for some reason an attorney has not been secured by the time of the Conciliation Conference, you shall appear personally, without an attorney, at the time scheduled for the Conciliation Conference.
7. 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 at the conciliation conference but not later than 30 days after service of the complaint or petition.
8. 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.
9. If Children's Services is conducting an investigation, their representative shall be subpoenaed by the appropriate attorney to attend the Conciliation Conference. It shall be the responsibility of the attorney subpoenaing the representative to obtain a Court Order or releases from the parties prior to the release of information by the representative.
10. At the Conciliation Conference, an effort will be made to see if the custody and/or visitation situation can be resolved by an agreement between the parties. If an agreement cannot be reached, an effort will be made to define and narrow the issues and to otherwise reduce the time required by the Court to hear the case. The Conciliator will prepare an Interim Order for pending a hearing to be scheduled before a Judge of the Court of Common Pleas of York County, Pennsylvania, without prejudice to the rights of the parties at such hearing, which all parties and the child(ren) shall be ordered to attend.

YOU SHOULD TAKE THIS PAPER TO YOUR LAWYER AT ONCE. IF YOU DO NOT HAVE A LAWYER OR CANNOT AFFORD ONE, GO TO OR TELEPHONE ONE OF THE OFFICES SET FORTH BELOW TO FIND OUT WHERE YOU CAN GET LEGAL HELP. DEPENDING ON ELIGIBILITY, LEGAL SERVICES MAY BE AVAILABLE AT A REDUCED FEE OR AT NO COST.

MID PENN LEGAL SERVICES  
29 North Queen St.  
York, PA 17403  
(800) 299-6599

ATTORNEY CONNECTIONS  
& MODEST MEANS  
(717) 854-8755  
By Appointment Only

IN ADDITION, VARIOUS COURT FORMS AND INFORMATION ARE AVAILABLE AND MAY BE OBTAINED AT:  
<https://yorkcountypa.gov/courts-criminal-justice/self-help-center/forms-packets.html>  
or at the Court Self-Help Center located on the 4<sup>th</sup> floor of the York County Judicial Center.

## AMERICANS WITH DISABILITIES ACT (TITLE II) POLICY

The 19th Judicial District of Pennsylvania, through the Administrative Office of York County Courts (AOYCC), complies with Title II of the Americans with Disabilities Act (ADA) which provides that “no qualified individual with a disability shall, by reason of such disability, be excluded from participation in or be denied the benefits of the services, programs, or activities of a public entity, or be subjected to discrimination by any such entity”. 42 U.S.C.A. §12132. Pursuant to that requirement, if you are an individual with a disability who needs an accommodation in order to participate in any judicial proceeding or any other service, program, or activity of the 19th Judicial District, you are entitled, at no cost to you, to the provision of certain assistance. The ADA does not require the AOYCC to take any action that would fundamentally alter the nature of its programs or services, or impose an undue financial or administrative burden.

If you require an accommodation under the ADA, it is recommended that you make your request as soon as possible, but at least three (3) business days before your scheduled participation in any court proceeding or 19th Judicial District program or activity. All requests for accommodation will be given due consideration and if necessary, may require an interactive process between the requestor and the AOYCC to determine the best course of action. Failure to provide advance notice may result in a delay in the proceeding.

To request a reasonable accommodation, you will need to request the Request for Reasonable Accommodation Form (ADA Form A) from and return it to:

ADA Coordinator  
Administrative Office of York County Courts  
York County Judicial Center  
45 N. George Street, York, PA 17401  
Telephone 717-771-9234, Fax 717-771-9911  
Email AOYCC@YorkCountyPa.gov.

If you need assistance completing this form, contact the ADA Coordinator.

Complaints alleging violations of Title II under the ADA may be filed with the ADA Coordinator at the address listed above, pursuant to the AOYCC ADA Complaint Procedure. A response will be sent to you after careful review of the facts.

BY THE COURT:

Date: \_\_\_\_\_

\_\_\_\_\_  
President Judge Joseph C. Adams

EN EL TRIBUNAL DE PRIMERA INSTANCIA DEL CONDADO DE YORK, PENNSYLVANIA

_____	:	No.
Denunciante	:	
<input type="checkbox"/> Demandante <input type="checkbox"/> Demandado	:	
	:	
vs.	:	
	:	
_____	:	Acción Civil - Ley
Acusado	:	
<input type="checkbox"/> Demandante <input type="checkbox"/> Demandado	:	Custodia

ORDEN PARA PROGRAMAR CONCILIACIÓN

**Conciliador Previamente Asignado a este caso:** \_\_\_\_\_

Usted \_\_\_\_\_, ha sido convocado en el tribunal para

- obtener algún tipo de custodia
- modificar una orden existente de custodia

atender una petición de desacato en la que se alega que usted voluntariamente desobedeció una orden de custodia existente. Si desea defenderse en contra del reclamo que se expone en las siguientes páginas, usted puede, pero no se le exige que interponga, por escrito, sus defensas y objeciones ante el juzgado. Si usted interpone o no interpone por escrito sus defensas y objeciones ante el juzgado, usted debe de comparecer tal como se le ordena a continuación.

Por la presente se le Ordena y se le Dirige:

1. El Licenciado \_\_\_\_\_, por medio de la presente se le asigna a conducir una Conferencia de Conciliación.
2. Una Conferencia de Conciliación se llevará a cabo delante del Conciliador asignado el \_\_\_\_\_ día de \_\_\_\_\_, 20\_\_\_\_, a las \_\_\_\_\_ .M., in la Sala de Audiencias 7, 4<sup>to</sup> Piso, del Centro Judicial del Condado de York, 45 North George Street, York, Pennsylvania, 17401. Anticipamos que la duración de la Conferencia de Conciliación es una hora.
3. Las partes envueltas deberán presentarse en persona a la Conferencia de Conciliación y deberán traer consigo todos los HIJOS DE SIETE (7) AÑOS O MÁS.

**PARTE ENCARCELADA:** Si usted está encarcelado y desea participar por medio de un teléfono de altavoz, usted puede hacerlo llamando al Conciliador al teléfono 717-771-3289 en la fecha y hora designada arriba.

**NECESIDAD DE INTÉRPRETE:** Si usted necesita un intérprete, puede solicitarlo llamando a la Oficina Administrativa de los Tribunales del Condado de York al teléfono 717-771-9234. Por favor llame a la oficina lo antes posible, a más tardar, tres días antes de la conferencia. Usted deberá proveer el día y la hora programado para la conferencia, así como también el nombre del individuo y el idioma requiriendo interpretación.

4. OBTENCIÓN DE CUSTODIA O MODIFICACIÓN DE UNA ORDEN DE CUSTODIA EXISTENTE: Si usted no comparece como lo delinea esta Orden, se pudiera entablar en su contra una Orden de custodia, una Orden de custodia parcial, o una Orden de visitas. Si no trae el/los hijo(s), el Juez pudiera emitir una orden para su arresto.

DESACATO: SI USTED NO COMPADECE EN PERSONA, EL JUEZ PUDIERA EMITIR UNA ORDEN PARA SU ARRESTO. Si el Juez falla que usted voluntariamente no siguió su orden, se le puede encontrar culpable de desacato y puede ser enviado a prisión, se le puede imponer una multa o ambas.

5. A las partes envueltas y a sus abogados, si es aplicable, por medio de la presente se les ordena a participar en negociaciones significativas para resolver este asunto antes de la Conferencia de Conciliación.
6. Usted tiene el derecho de ser representado por un abogado, quien puede asistir a la Conferencia de Conciliación con usted. Si por alguna razón usted no ha contratado a un abogado para la fecha de la Conferencia de Conciliación, usted deberá presentarse personalmente, sin un abogado, en el día y hora programada para la Conferencia de Conciliación.
7. Usted deberá someter al tribunal comprobantes relacionados con cualquier antecedente penal o historial de abuso concerniente a usted y cualquier persona que está viviendo en su hogar, en o antes del día que se haga el contacto inicial en persona en la conferencia de conciliación, pero no más tarde de 30 días después de someter la denuncia o solicitud.
8. Ninguna de las partes envueltas podrá cambiar el lugar de residencia de cualquier hijo lo cual impedirá significativamente la habilidad de la otra parte de ejercer sus derechos de custodia, sin antes cumplir con todas la provisiones aplicables del reglamento 23 Pa.C.S. § 5337 y Pa.R.C.P. No. 1915.17 concerniente al traslado de un menor.
9. Si la agencia de Servicios para Menores está conduciendo una investigación, el representante de esta deberá ser citado judicialmente por el abogado designado, para que asista a la Conferencia de Conciliación. Deberá ser la responsabilidad del abogado que emite la citación jurídica al representante de Servicios para Menores, de obtener una Orden Judicial o autorizaciones de las partes implicadas, antes de la publicación de información por parte del representante.
10. En la Conferencia de Conciliación, se hará un esfuerzo para que el asunto de la custodia y/o derechos de visita pueda ser resuelto por medio de un acuerdo entre las partes envueltas. Si no se puede llegar a un acuerdo, se hará un esfuerzo por definir y restringir las opciones y de otro modo reducir la cantidad de tiempo requerido por el Juez en atender el caso. El Conciliador preparará una Orden Temporal en espera de la audiencia que será programada ante un Juez del Tribunal de Primera Instancia del Condado de York, Pennsylvania, sin perjuicio a los derechos de las partes envueltas en dicha audiencia, a la cual todas las partes, y su(s) hijo(s) se le ordenará que asistan.

USTED DEBERÍA ENTREGAR ESTE DOCUMENTO A SU ABOGADO INMEDIATAMENTE. SI USTED NO TIENE UN ABOGADO O NO PUEDE PAGAR LOS GASTOS DE UN ABOGADO, VAYA PERSONALMENTE O LLAME A UNA DE LAS OFICINAS MENCIONADAS A CONTINUACIÓN, PARA QUE SE LE INDIQUE DONDE PUEDE OBTENER AYUDA LEGAL. DEPENDIENDO EN ELEGIBILIDAD,

LOS SERVICIOS LEGALES PUEDE QUE ESTEN DISPONIBLES A UN PRECIO REDUCIDO O SIN COSTO ALGUNO.

MID PENN LEGAL SERVICES  
29 North Queen St.  
York, PA 17403  
(800) 299-6599

ATTORNEY CONNECTION  
& MODEST MEANS  
(717) 854-8755  
Solamente con cita previa

ADEMÁS, VARIOS FORMULARIOS DEL TRIBUNAL E INFORMACIÓN ESTÁN DISPONIBLES Y PUEDEN SER OBTENIDOS EN: <http://yorkcountypa.gov/courts-criminal-justice/self-help-center/forms-packets.html>  
o en el Centro de Auto Servicio localizado en el cuarto piso del Centro Judicial del Condado de York.

## LEY PARA AMERICANOS CON DISCAPACIDADES (TÍTULO II)

El Distrito Judicial 19no de Pennsylvania, a través de la Oficina Administrativa de Tribunales del Condado de York (AOYCC, por sus siglas en inglés), cumple con el Título II de la Ley Para Americanos con Discapacidades (ADA, por sus siglas en inglés) la cual ley pide que “ningún individuo calificado con una discapacidad deberá, por razón de tal discapacidad, ser excluido de participar en, o ser denegado de los beneficios de los servicios, programas, o actividades de una entidad pública, o ser sometido a discriminación por cualquiera de estas entidades”. 42 U.S.C.A. §12132. Conforme a ese requisito, si usted es un individuo con una discapacidad que necesita una acomodación para poder participar en cualquier diligencia judicial o cualquier otro servicio, programa, o actividad del Distrito Judicial 19no, usted tiene derecho, sin ningún costo para usted, a que se le provea cierta asistencia. La ADA no requiere que el AOYCC tome cualquier acción que fundamentalmente altere la naturaleza de sus programas o servicios, o imponga una carga excesiva financiera o administrativa.

Si usted requiere tal acomodación bajo la ADA, se recomienda que haga su petición lo antes posible, pero al menos tres (3) días laborales antes de su participación programada en cualquier diligencia judicial o en cualquier programa o actividad del Distrito Judicial 19no. Todas las peticiones para acomodación serán consideradas y de ser necesario, puede que requiera un proceso interactivo entre el solicitante y la AOYCC para determinar el mejor curso a seguir. El no proveer una notificación por adelantado, puede resultar en que la diligencia judicial se retrase.

Para solicitar una acomodación razonable, necesitará solicitar y devolver el formulario Solicitud para Acomodación Razonable (Formulario A del ADA) a:

Coordinador de ADA  
Administrative Office of York County Courts  
York County Judicial Center  
45 N. George Street, York, PA 17401  
Teléfono 717-771-9234, Fax 717-771-9911  
Correo electrónico: AOYCC@YorkCountyPa.gov.

Si necesita ayuda completando este formulario, comuníquese con el Coordinador de ADA.

Cualquier reclamo afirmando infracciones del Título II bajo el ADA, puede ser sometido al Coordinador de ADA en la dirección antes mencionada, en conformidad con el Procedimiento para Reclamos de la ADA AOYCC. Se le enviará una respuesta a su reclamo después de un análisis cuidadoso de los hechos.

POR EL TRIBUNAL:

Fecha \_\_\_\_\_

\_\_\_\_\_  
Juez Presidente Joseph C. Adams

**IN THE COURT OF COMMON PLEAS OF YORK COUNTY, PENNSYLVANIA**

<b>Plaintiff</b>	:	No. _____-FC-_____	<b>-03</b>
	:		
<b>VS.</b>	:	<b>CIVIL ACTION – LAW</b>	
	:		
<b>Defendant</b>	:	<b>CUSTODY</b>	

**COMPLAINT FOR CUSTODY**

1. The Plaintiff is \_\_\_\_\_, who currently resides at \_\_\_\_\_, York County, Pennsylvania.

2. The Defendant is \_\_\_\_\_, who currently resides at \_\_\_\_\_, York County, Pennsylvania.

3. The Plaintiff seeks

Shared Legal Custody	Sole Legal Custody
Sole Physical Custody	Shared Physical Custody
Primary Physical Custody	Partial Physical Custody
	Supervised Physical Custody

of the following child(ren):

Name	Present Residence	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

4. The child(ren) (was / were) (was not / were not) born out of wedlock. During the past five years, the children have resided with the following persons at the following addresses:

(List All Persons)

(List All Addresses)

(Dates)

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

5. The mother of the children is the Plaintiff, Defendant, currently residing at the address above. She is married divorced single separated.

6. The father of the children is the Plaintiff, Defendant, currently residing at the address above. He is married divorced single separated.

7. The relationship of Plaintiff to the child(ren) is that of \_\_\_\_\_.  
The Plaintiff currently resides with the following persons:

Name

Relationship

_____	_____
_____	_____
_____	_____
_____	_____

8. The relationship of Defendant to the child(ren) is that of \_\_\_\_\_.

The Defendant currently resides with the following persons:

Name	Relationship
_____	_____
_____	_____
_____	_____

9. 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; nor does he/ she have information of such proceeding pending in a Court of this Commonwealth concerning the child(ren). The court, term and number, and its relationship to this action is: \_\_\_\_\_

\_\_\_\_\_

Plaintiff  has  does not have information of a custody proceeding concerning the child(ren) pending in a court of this Commonwealth or any other state. The Court, term, and number and its relationship to this action is: \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_

10. The best interest and permanent welfare of the child(ren) will be served by granting the relief requested because: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

11. Each parent whose parental rights to the child(ren) 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 or visitation of the child(ren) will be given notice of the pendency of this action and the right to intervene.

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

Wherefore, Plaintiff requests the Court to enter an award of custody to Plaintiff as is in the best interest of the child(ren).

I hereby certify that the statements made in this Complaint are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities.

Date: \_\_\_\_\_

Signature \_\_\_\_\_

Plaintiff, Pro-Se

Print Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_

**IN THE COURT OF COMMON PLEAS OF YORK COUNTY, PENNSYLVANIA  
FAMILY DIVISION**

_____	:	NO. _____-FC-_____
Plaintiff	:	
	:	
vs.	:	Action in 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:

1. Unless indicated by my checking the box next to a crime below, neither I nor any other member of my household have been convicted or pled guilty or pled no contest or was adjudicated delinquent where the record is publicly available pursuant to the Juvenile Act, 42 Pa.C.S. §6307 to any of the following crimes in Pennsylvania or a substantially equivalent crime in any other jurisdiction, including pending charges:

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	Sentence
<input type="checkbox"/>	18 Pa.C.S. Ch. 25 (relating to criminal homicide)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2702 (relating to aggravated assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2706 (relating to terroristic threats)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2709.1 (relating to stalking)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

- |                          |   |                          |                          |       |       |
|--------------------------|---|--------------------------|--------------------------|-------|-------|
| <input type="checkbox"/> | 18 Pa.C.S. §2901 (relating to kidnapping)                                       | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §2902 (relating to unlawful restraint)                               | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §2903 (relating to false imprisonment)                               | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §2910 (relating to luring a child into a motor vehicle or structure) | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3121 (relating to rape)   | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3122.1 (relating to statutory sexual assault)                       | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3123 (relating to involuntary deviate sexual intercourse)           | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3124.1 (relating to sexual assault)                                 | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3125 (relating to aggravated indecent assault)                      | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3126 (relating to indecent assault)                                 | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3127 (relating to indecent exposure)                                | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3129 (relating to sexual intercourse with animal)                   | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3130 (relating to conduct relating to sex offenders)                | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3301 (relating to arson and related offenses)                       | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |

- |                          |  |                          |                          |       |       |
|--------------------------|--|--------------------------|--------------------------|-------|-------|
| <input type="checkbox"/> | 18 Pa.C.S. §4302 (relating to incest)  | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §4303 (relating to concealing the death of child)                                 | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §4304 (relating to endangering welfare of children)                               | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §4305 (relating to dealing in infant children)                                    | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §5902(b) (relating to prostitution and related offenses)                          | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
|                          | 18 Pa.C.S. §5903(c) or (d) (relating to obscene and other sexual materials and performances) |                          | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §6301 (relating to corruption of minors)  |                          | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §6312 (relating to sexual abuse of children)                                      |                          | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §6318 (relating to unlawful contact with minor)                                   |                          | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §6320 (relating to sexual exploitation of children)                               |                          | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 23 Pa.C.S. §6114 (relating to contempt for violation of protection order or agreement)       |                          | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | Driving under the influence of drugs or alcohol  |                          | <input type="checkbox"/> | _____ | _____ |

Manufacture, sale, delivery,  
holding, offering for sale or  
possession of any controlled  
substance or other drug or  
device

\_\_\_\_\_

2. Unless indicated by my checking the box next to an item below, neither I nor any other member of my household have a history of violent or abusive conduct including the following:

Check all  
that  
apply

Self

Other household  
member

Date

A finding of abuse by a Children & Youth  
Agency or similar agency in Pennsylvania  
or similar statute in another jurisdiction

\_\_\_\_\_

Abusive conduct as defined under the  
Protection from Abuse Act in  
Pennsylvania or similar statute in another  
jurisdiction

\_\_\_\_\_

Involvement with a Children & Youth  
Agency or similar agency in Pennsylvania  
or another jurisdiction.

\_\_\_\_\_

Where?:

\_\_\_\_\_

Other:

\_\_\_\_\_

\_\_\_\_\_

State the date and circumstance of the child abuse, the named perpetrator of the abuse, and the jurisdiction or location where the abuse took place.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Please list any evaluation, counseling or other treatment received following conviction or finding of abuse:

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4. If any conviction above applies to a household member, not a party, state that person's name, date of birth and relationship to the child(ren):

---

---

Identify any household members by name and age that currently reside with you, and were included in the responses to Questions 1 & 2:

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5. If you are aware that the other party or members of the other party's household has or have a criminal/abuse history, please explain:

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6. State whether you or any member of your household was provided services by a child welfare agency (eg., County Children, Youth, & Families Agency). If yes, please indicate:

a. The individuals who received services: \_\_\_\_\_

b. The type of services provided: \_\_\_\_\_

---

c. The circumstances surrounding the provision of services: \_\_\_\_\_

\_\_\_\_\_.

d. The time frame during which the services were or are being provided: \_\_\_\_\_

\_\_\_\_\_.

e. The jurisdiction or location where the services are being or were provided: \_\_\_\_\_

\_\_\_\_\_.

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

**IN THE COURT OF COMMON PLEAS OF YORK COUNTY, PENNSYLVANIA**

\_\_\_\_\_  
Plaintiff  
v.  
\_\_\_\_\_  
Defendant

: Case No. \_\_\_\_\_  
:  
:  
: Case Type: Custody ( ) Divorce  
: ( ) Paternity ( ) Support  
: ( ) Protection from Abuse  
:  
: ( ) Other: \_\_\_\_\_

**ENTRY OF APPEARANCE AS A SELF-REPRESENTED PARTY**

1. I, \_\_\_\_\_ (printed name), represent myself as the  
Plaintiff or Defendant in this case.

2. REMOVAL OR WITHDRAWAL OF COUNSEL OF RECORD (if applicable)

( ) Remove \_\_\_\_\_, Esq. as my attorney in this case.

or

( ) Withdraw my appearance for the filing party in this case. My client has been provided with all orders requiring any action to be taken by the client. I hereby certify that this change is not intended to, nor will it, delay this proceeding to the best of my knowledge, information and belief.

Printed Name: \_\_\_\_\_, Esq. Attorney ID No.: \_\_\_\_\_

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

3. All pleadings and legal papers can be served on me at the address listed below:

Address Line 1: \_\_\_\_\_

Address Line 2: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Telephone: (\_\_\_\_\_) \_\_\_\_\_ FAX: (\_\_\_\_\_) \_\_\_\_\_

Email Address: \_\_\_\_\_

4. I understand that I have a continuing obligation to provide current contact information to the Court, to other self-represented parties, and to attorneys of record in this case.

Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

THE PARTY FILING THIS ENTRY OF APPEARANCE MUST PROVIDE NOTICE BY SENDING A COPY TO ALL PARTIES AND ATTORNEYS, INCLUDING ANY ATTORNEY REMOVED FROM THE CASE IN SECTION 2 ABOVE.

**IN THE COURT OF COMMON PLEAS OF YORK COUNTY, PENNSYLVANIA**

\_\_\_\_\_  
**Plaintiff**

**VS.**

\_\_\_\_\_  
**Defendant**

: No. \_\_\_\_\_-FC-\_\_\_\_\_ -03  
:  
: **CIVIL ACTION – LAW**  
:  
:  
: **CUSTODY**  
:

**CONCILIATION CONFERENCE MEMORANDUM**

Submitted by \_\_\_\_\_, Pro-Se.

1. Party is: \_\_\_\_\_

2. Child(ren)'s Names and Years of Birth:

Name	Date of Birth
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

3. Party is requesting (Choose **1 type of Physical Custody & 1 type of Legal Custody**):

Primary Physical Custody

Sole Physical Custody

Sole Legal Custody

Partial Physical Custody

Supervised Physical Custody

Shared Legal Custody

Shared Physical Custody

Other: \_\_\_\_\_

4. The present custody situation is as follows: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

5. The present custody situation has existed since approximately \_\_\_\_\_ months / years.

6. Has either party prevented the other party from having any contact with the child? If so, describe the circumstances: \_\_\_\_\_

\_\_\_\_\_

7. Do you allege unfitness of the other party? (Yes, No, or Reserved) \_\_\_\_\_

8. Do you allege improper home environment? (Yes, No, or Reserved) \_\_\_\_\_

9. What other issues will be presented to the court? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Do you plan to raise emotional or psychological problems of the children or others involved? (Yes, No, or Reserved) \_\_\_\_\_.

11. Do you request psychological evaluations? (Yes, No, or Reserved) \_\_\_\_\_.

**(NOTE: The court will NOT PAY for you to have evaluations)**

12. Will you agree to the appointment of one neutral psychologist to be used by both parties to perform psychological evaluations? (Yes, No) \_\_\_\_\_.

13. How much time will the presentation of your case take? \_\_\_\_\_ day(s).

14. Factual witnesses:

Name

Address

15. Expert witnesses:

Name

Address

16. Are home studies requested? (Yes, No, or Reserved) \_\_\_\_\_.

17. Other relevant information you wish to bring to the attention of the Conciliator:

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Respectfully submitted,

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(Your Signature)

---

(Print your name)

---

(Street Address)

---

(City, State and Zip)

**IN THE COURT OF COMMON PLEAS OF YORK COUNTY, PENNSYLVANIA  
FAMILY DIVISION**

_____	:	NO. _____-FC-_____
Plaintiff	:	
	:	
vs.	:	Action in 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:

1. Unless indicated by my checking the box next to a crime below, neither I nor any other member of my household have been convicted or pled guilty or pled no contest or was adjudicated delinquent where the record is publicly available pursuant to the Juvenile Act, 42 Pa.C.S. §6307 to any of the following crimes in Pennsylvania or a substantially equivalent crime in any other jurisdiction, including pending charges:

Check all that apply	Crime	Self	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	Sentence
<input type="checkbox"/>	18 Pa.C.S. Ch. 25 (relating to criminal homicide)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2702 (relating to aggravated assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2706 (relating to terroristic threats)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	18 Pa.C.S. §2709.1 (relating to stalking)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

- |                          |   |                          |                          |       |       |
|--------------------------|---|--------------------------|--------------------------|-------|-------|
| <input type="checkbox"/> | 18 Pa.C.S. §2901 (relating to kidnapping)                                       | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §2902 (relating to unlawful restraint)                               | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §2903 (relating to false imprisonment)                               | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §2910 (relating to luring a child into a motor vehicle or structure) | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3121 (relating to rape)   | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3122.1 (relating to statutory sexual assault)                       | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3123 (relating to involuntary deviate sexual intercourse)           | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3124.1 (relating to sexual assault)                                 | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3125 (relating to aggravated indecent assault)                      | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3126 (relating to indecent assault)                                 | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3127 (relating to indecent exposure)                                | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3129 (relating to sexual intercourse with animal)                   | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3130 (relating to conduct relating to sex offenders)                | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §3301 (relating to arson and related offenses)                       | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |

- |                          |  |                          |                          |       |       |
|--------------------------|--|--------------------------|--------------------------|-------|-------|
| <input type="checkbox"/> | 18 Pa.C.S. §4302 (relating to incest)  | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §4303 (relating to concealing the death of child)                                 | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §4304 (relating to endangering welfare of children)                               | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §4305 (relating to dealing in infant children)                                    | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §5902(b) (relating to prostitution and related offenses)                          | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §5903(c) or (d) (relating to obscene and other sexual materials and performances) | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §6301 (relating to corruption of minors)  | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §6312 (relating to sexual abuse of children)                                      | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §6318 (relating to unlawful contact with minor)                                   | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 18 Pa.C.S. §6320 (relating to sexual exploitation of children)                               | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | 23 Pa.C.S. §6114 (relating to contempt for violation of protection order or agreement)       | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |
| <input type="checkbox"/> | Driving under the influence of drugs or alcohol  | <input type="checkbox"/> | <input type="checkbox"/> | _____ | _____ |

- Manufacture, sale, delivery, holding, offering for sale or possession of any controlled substance or other drug or device

2. Unless indicated by my checking the box next to an item below, neither I nor any other member of my household have a history of violent or abusive conduct, or involvement with a Children & Youth agency, including the following:

Check all that apply	Self	Other household member	Date
<input type="checkbox"/> A finding of abuse by a Children & Youth Agency or similar agency in Pennsylvania or similar statute in another jurisdiction	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/> Abusive conduct as defined under the Protection from Abuse Act in Pennsylvania or similar statute in another jurisdiction	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/> Involvement with a Children & Youth Agency or similar agency in Pennsylvania or another jurisdiction. Where?: _____	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/> Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	_____

State the date and circumstance of the child abuse, the named perpetrator of the abuse and the jurisdiction or location where the abuse took place.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. Please list any evaluation, counseling or other treatment received following conviction or finding of abuse:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. If any conviction above applies to a household member, not a party, state that person's name, date of birth and relationship to the child(ren):

---

---

Identify all household members by name and age that currently reside with you, and were included in the responses to Questions 1-2

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5. If you are aware that the other party or members of the other party's household has or have a criminal/abuse history, please explain:

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6. State whether you or any member of your household was provided services by a child welfare agency (eg., County Children, Youth & Families agency). If yes, please indicate:

a. The individuals that received services: \_\_\_\_\_

b. The type of services provided: \_\_\_\_\_

---

c. The circumstances surrounding the provision of services: \_\_\_\_\_

---

---

d. The time frame during which the services were or are being provided: \_\_\_\_\_

---

e. The jurisdiction or location where services are being or were provided: \_\_\_\_\_

\_\_\_\_\_

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

\_\_\_\_\_  
Defendant's Printed Name

**IN THE COURT OF COMMON PLEAS OF YORK COUNTY, PENNSYLVANIA**

\_\_\_\_\_  
**Plaintiff** : No. \_\_\_\_\_-FC-\_\_\_\_\_-03  
: :  
: **CIVIL ACTION – LAW**  
vs : :  
: :  
: **CUSTODY**  
\_\_\_\_\_  
**Defendant**

**ACCEPTANCE OF SERVICE**

I, \_\_\_\_\_, accept service of the Custody  
(Name of Defendant)

Complaint filed on \_\_\_\_\_ & Conciliation Scheduling Order.  
(Date of Filing)

\_\_\_\_\_  
Date of Receipt

\_\_\_\_\_  
Signature of Defendant

\_\_\_\_\_  
Mailing Address of Defendant

\_\_\_\_\_  
City, State and Zip Code

COMMONWEALTH OF PENNSYLVANIA :  
: SS  
COUNTY OF YORK :

On the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, the undersigned officer, personally appeared \_\_\_\_\_ known to me (or satisfactorily proven) to be the person whose name is subscribed to the within document, and acknowledged that he/she executed the same for the purposes therein contained.

IN WITNESS WHEREOF, I have hereunto set my hand and official seal.

\_\_\_\_\_  
Notary Public

IN THE COURT OF COMMON PLEAS OF YORK COUNTY, PENNSYLVANIA

Plaintiff : No. \_\_\_\_\_-FC-\_\_\_\_\_ -03
:
: CIVIL ACTION – LAW
VS. :
:
Defendant : CUSTODY

AFFIDAVIT OF PERSONAL SERVICE

I, \_\_\_\_\_, hereby verify that on the
(Name of Person who Served Custody Complaint)

\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, I served the Defendant with a true & correct copy of the Complaint
(Date) (Month)

for Custody filed \_\_\_\_\_ & Conciliation Scheduling Order by the following method:
(Date of filing Custody Complaint)

The Defendant was personally served with a true and correct copy of the above pleading
by hand-delivering the same to the Defendant by someone other than the Plaintiff.
Personal service was made at the following location and time:

\_\_\_\_\_
(Location of Service)

on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, at \_\_\_\_\_ o'clock.
(Date) (Month) (Time)

(PERSONAL SERVICE CANNOT BE MADE BY PLAINTIFF)

I verify that the statements made in this Affidavit 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
falsifications to authorities.

\_\_\_\_\_
Date

\_\_\_\_\_
Signature of the Person Who Made Service

\_\_\_\_\_
Print Name

IN THE COURT OF COMMON PLEAS OF YORK COUNTY, PENNSYLVANIA

	:	No. _____-FC-_____	-03
<b>Plaintiff</b>	:		
	:	<b>CIVIL ACTION – LAW</b>	
VS.	:		
	:		
	:	<b>CUSTODY</b>	
<b>Defendant</b>			

**AFFIDAVIT OF SERVICE BY CERTIFIED MAIL**

I, \_\_\_\_\_, hereby verify that on  
(Name of Plaintiff)

the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, I served the Defendant with a true and correct copy  
(Date) (Month)

of the Custody Complaint filed on \_\_\_\_\_ by the following method:  
(Date of filing Custody Complaint)

Service was made by **United States Postal Service**, first class mail, postage prepaid, by **both** standard first class mail & certified, **restricted delivery**, return receipt requested to the Defendant, on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. The return receipt (postal green card) signed by Defendant and the receipt from the Post Office are attached hereto.

I verify that the statements made in this Affidavit 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 falsifications to authorities.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Plaintiff

\_\_\_\_\_  
Print Name

**IN THE COURT OF COMMON PLEAS OF YORK COUNTY, PENNSYLVANIA**

\_\_\_\_\_  
**Plaintiff** : No. \_\_\_\_\_-FC-\_\_\_\_\_-03  
: :  
: **CIVIL ACTION – LAW**  
VS. : :  
: :  
: **CUSTODY**  
\_\_\_\_\_  
**Defendant**

**MEMORANDUM FOR CUSTODY PRE-TRIAL CONFERENCE**

SUBMITTED BY: \_\_\_\_\_

COUNSEL FOR: \_\_\_\_\_

**I. BRIEF SUMMARY OF CASE, INCLUDING NAMES AND DATES OF BIRTH OF CHILDREN AT ISSUE AND THE CURRENT CUSTODY SITUATION:**

Plaintiff, \_\_\_\_\_ is the  
(Name of Plaintiff)

\_\_\_\_\_  
(Plaintiff's relationship to the child/ren)

Defendant, \_\_\_\_\_ is the  
(Name of Defendant)

\_\_\_\_\_  
(Defendant's relationship to the child/ren)

of the following child(ren)'s at issue:

Name:

Date of birth:

_____	_____
_____	_____
_____	_____
_____	_____

The present custody situation is as follows:

The present custody situation has existed since approximately \_\_\_\_\_  
months / years.

II. STATEMENT OF ISSUES EXPECTED TO ARISE DURING TRIAL:

III. ADMISSION FROM PLEADINGS TO BE MADE PART OF RECORD:

IV. STIPULATION OF PARTIES:

V. WITNESSES TO BE CALLED:

NAME	ADDRESS	RELATIONSHIP TO PARTY & SUBJECT OF TESTIMONY
1.		
2.		
3.		
4.		
5.		
6.		

(Pursuant to Pa.R.C.P. §1915.4-4(b)(2) the Memorandum for Custody Pre-Trial Conference must include a statement by the party or the party's counsel that he or she has communicated with each listed witness.)

VI. STATUS OF EXPERT WITNESSES, REPORTS, EVALUATIONS AND STUDIES:

VII. STATEMENT OF OBJECTIONS OR UNUSUAL EVIDENTIARY PROBLEMS EXPECTED TO ARISE AT TRIAL: (Parties should submit authority for their respective positions with this memorandum.)

VIII. SPECIAL REQUESTS, UNCOMPLETED MATTERS:

IX. STATEMENT OF SETTLEMENT PROSPECTS:

X. ESTIMATED TIME NEEDED FOR TRIAL:

Respectfully submitted,

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Address - Street

\_\_\_\_\_  
City, State and Zip Code

\_\_\_\_\_  
Phone Number

**IN THE COURT OF COMMON PLEAS OF YORK COUNTY, PENNSYLVANIA**

\_\_\_\_\_  
**Plaintiff**

**VS.**

\_\_\_\_\_  
**Defendant**

: No. \_\_\_\_\_-FC-\_\_\_\_\_ -03  
:  
: **CIVIL ACTION – LAW**  
:  
:  
: **CUSTODY**

**PARENTING PLAN**

**This parenting plan involves the following child/ children:**

Child's name	Age	Where does this child live?
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____
4. _____	_____	_____

**If you have children not addressed by this parenting plan, name here:**

Child's name	Age	Where does this child live?
1. _____	_____	_____
2. _____	_____	_____
3. _____	_____	_____

**Legal Custody** (who makes decisions about certain things):

	Both parties decide together	Plaintiff	Defendant
Diet			
Religion			
Medical Care			
Mental Health Care			
Discipline			
Choice of School			
Choice of Study			
School Activities			
Sports Activities			
Additional items			

Explain what process you will use to make decisions? (*For example, the parent confronted with or anticipating the choice will call the other parent when the choice presents itself, and the other parent must agree or disagree within 24 hours of any deadline*)

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**Physical Custody** (where the child /children live):

The child's / children's residence is with \_\_\_\_\_

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Describe which days and which times of the day the child / children will be with each person:

Day of the week	Name of person and time
Sunday	
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	

**Describe where and when the child /children will be dropped off and/ or picked up** (day and time of day)?

Drop Off

Where \_\_\_\_\_

When \_\_\_\_\_

Pick-Up

Where \_\_\_\_\_

When \_\_\_\_\_

If one of you doesn't show up, how long will the other wait? \_\_\_\_\_

If there are any extraordinary costs (taxi, train, airplane, etc.), who will pay for which cost?

**HOLIDAYS**

Where will the child/ children stay?

Holiday	Year A	Year B	Every Year
Martin Luther King Day			
President's Day			
Easter			
Memorial Day			
Fourth of July			
Labor Day			
Yom Kippur			
Rosh Hashanah			
Thanksgiving			
Vacation after Thanksgiving			
Christmas Vacation			
Kwanzaa			
New Year's Eve / New Year's Day			
Spring Vacation			
Easter Sunday			

Child's Birthday			
Mother's Day			
Father's Day			
Other			
Other			
Other			

Summer Vacation Plans \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Special Activities or School Activities**

Child's Name	Activity	Will both of you attend? If not, which of you will attend?

**Temporary changes to this parenting schedule**

From time to time, one of you might want or need to rearrange the parenting time schedule due to work, family or other events. You can attempt to agree on these changes. If you cannot agree, the parent receiving the request will make the final decision.

The parent asking for the change will ask \_\_\_\_ in person, \_\_\_\_ by letter/mail, \_\_\_\_ by phone. No later than \_\_\_\_ 12 hours, \_\_\_\_ 24 hours, \_\_\_\_ 1 week, \_\_\_\_ 1 month in advance.

The parent being asked for a change will reply \_\_\_\_ in person, \_\_\_\_ by letter/mail, \_\_\_\_ by phone. No later than \_\_\_\_ 12 hours, \_\_\_\_ 24 hours, \_\_\_\_ 1 week, \_\_\_\_ 1 month in advance.

**May parents contact one another?**

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When the child/ children is/ are with one of you, how may they contact the other parent?

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When and how may \_\_\_\_\_ contact the child? \_\_\_\_\_

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In the event that proposed changes, disputes or alleged breaches of this parenting plan and custody order are necessary or desired, the parties agree that such changes will be addressed by the following method (specify method of arbitration, mediation, court action, etc.):

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**The following matter or matters as specified by the court:**

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**Other** (anything else you want to agree on):

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Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Mother

\_\_\_\_\_  
Print Name

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Father

\_\_\_\_\_  
Print Name