	IN THE CIRCUIT COURT OF THE		JUDICIAL CIRCUIT		
		IN AND FOR	COUNTY, FLORIDA		
			Casa Na		
			Case No:		
			Division:		
	· · · · · · · · · · · · · · · · · · ·	 Petitioner,			
	and				
		Respondent.			
		SAFETY-FOCUSED	PARENTING PLAN		
This p	arenting	plan is: (Choose only one)			
•			ourt with the agreement of the parties.		
	[]	A proposed Parenting Plan submitted (Parent's Name)	d by or on behalf of:		
	[]	A Parenting Plan established by the o	court.		
This p		plan is: (Choose only one)			
		A final Parenting Plan established by			
		A temporary Parenting Plan establish			
	[]	A modification of a prior final Parent	ing Plan or phor final order.		
ı.	PAREN	ITS			
	Mothe	r			
	Addres	SS:			
	reiepn	one number: :			
			nther's address is unknown)		
	() Address Unknown: (Please indicate if mother's address is unknown)() Address Confidential: (Please indicate if mother's address and telephone numbers a				
	confidential pursuant to either a () Final Judgment for Protection Against Domestic Violence of				
		her court order	-		
	Father				
	Name:				
	Addres	ss:			
	Teleph	one Number:			
		:	h. J. ald		
	() Ad	ldress Unknown: (Please indicate if fat	ners address is unknown)		

	confid	Address Confidential: (Please indicential pursuant to either a () Final Jeher court order	udgment for Prote	ction Against Domestic Violence or
II.	(add a	REN: This parenting plan is for the fo dditional lines as needed)	llowing child(ren) b	, , ,
	Name ———			Date of Birth
III.	JURISE	DICTION		
	The Ur	nited States is the country of habitual	residence of the cl	nild(ren).
		ate of Florida is the child(ren)'s home ction and Enforcement Act.	e state for the purp	oses of the Uniform Child Custody
	Custod U.S.C. Civil As	arenting Plan is a child custody ded by Jurisdiction and Enforcement Act, Section 11601 et seq., the Parental K spects of International Child Abductions state and federal laws.	the International idnapping Preventi	Child Abduction Remedies Act, 42 on Act, and the Convention on the
	Other:	·		·
IV.	PAREN	ITAL RESPONSIBILITY (Choose only o	ne)	
	[]	Sole Parental Responsibility It is in the best interests of the chil authority to make major decisions for the parents to have shared pare	for the child(ren.)	It is detrimental to the child(ren)
	[]	Shared Parental Responsibility with It is in the best interests of the chil on the major decisions involving the authority for making major decision	d(ren) that the pa ne child(ren). If the	rents confer and attempt to agree e parents are unable to agree, the
		Education/Academic decisions Non-emergency health care	[] Mother [] Mother [] Mother [] Mother [] Mother	[] Father [] Father [] Father [] Father [] Father

	[]	Other: (Explain)	
٧.	. TIME SHARING SCHEDULE (Choose only one)		
	[]	No Time-Sharing: The [] Mother [] Father shall have no contact with the child(ren) until further order of the court. All parenting decisions shall be made by the other parent.	
	[]	Supervised Time-Sharing: Whenever the child(ren) are with the [] Mother [] Father, the supervisor shall be present. The [] Mother [] Father has the right to spend time with the child(ren) even though the other parent will be making most, if not all, of the parenting decisions which are made on the child(ren)'s behalf. The time-sharing schedule shall be mutually agreed upon between the parents, but not less than the schedule set forth below: (Choose as appropriate)	
	[]	hours per week. The place(s), and time(s) shall be set by the [] Mother []Father.	
	[]	From m. to m, on the following day(s)	
	[]	Restricted Time-Sharing: The [] Mother [] Father shall have time-sharing with the following restrictions. (The restrictions should be described in detail such as time-sharing only in public places, no overnight visits, etc.) The time-sharing schedule shall be mutually agreed uponbetween the parents, but not less than the schedule set forth below:	
	[]	hours per week. The place(s), and time(s) shall be set by the [] Mother []Father.	
		[] From m. to m, on the following day(s)	
	[]	Other:	
VI.	SUPER	VISOR AND SUPERVISION (Choose only one)	
		pervisor. The person supervising the time-sharing shall: (Choose only one) Be selected by the [] Mother [] Father.	
	[]	Be selected by the [] Mother [] Father, subject to the other parent's approval.	

	[]	Other:
2.	Res	strictions or Level of Supervision:
3.		ts of Supervision The costs of the supervision shall be paid by the [] Mother [] Father
	[]	Other:
VII. LO	OCAT	ION: (Choose only one)
	ne [] cation	Mother $[\]$ Father shall spend his/her time-sharing with the child(ren) at the following $n(s)$:
[]	Supervised visitation center (name and address of facility)
[]	(location) or other location designated by the
[]	Any location designated by the [] Mother [] Father with the approval of the supervisor.
[]	Other:
VIII.	DESIG	NATION FOR OTHER LEGAL PURPOSES
1.	ma _. pur	e child(ren) named in this Safety-Focused Parenting Plan are scheduled to reside the jority of the time with the [] Mother [] Father. This majority designation is SOLELY for poses of all other state and federal statutes which require such a designation. This signation does not affect either parent's rights and responsibilities under this parenting n.
2.		purposes of school-boundary determination and registration, the [] Mother's Father's address shall be designated.

IX. TRANSPORTATION AND EXCHANGE OF CHILD(REN)

1. Transportation

The child(ren) shall not be driven in a car unless the driver has a valid driver's license, automobile insurance, seat belts, and child safety seats as required by Florida law.

	The [] Mother [] Father or mutually agreed upon person shall be responsible fo transporting the child(ren) to the exchange point. The child(ren) shall be picked up and/or returned to the exchange point by (Choose only one);
	[] The [] Mother [] Father with the supervisor present.
	[] The supervisor alone.
	[] Other:
2.	Exchange
	The exchange of the child(ren) shall occur at: (Choose all that apply)
	[] The site of the supervised visit.
	[] A monitored exchange location (specify name and address of facility)
	[] Other:
	[] The [] Mother [] Father is prohibited from coming to the exchange point.
СО	MMUNICATION
1.	Between Parents (Choose only one) [] All communications regarding the child(ren) shall be between the parents. The parents shall not use the child(ren) as messengers to convey information, ask questions, or set up schedule changes. The parents shall communicate with each other: (Choose all that apply) [] in person [] by telephone
	[] by letter [] by e-mail [] Other:
	[] No Communication . Unless otherwise prohibited by court order, all information and communication regarding the child(ren) shall be exchanged via or through
2.	Between Parent and Child(ren) The [] Mother [] Father (Choose all that apply)

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X.

		[]	Shall not telephone, write, or e-mail the child(ren) unless the contact is agreed to in advance by the other parent.
		[]	May write or e-mail the child(ren) at any time. Each parent shall provide a contact address (and e-mail address if appropriate) to the other parent, unless otherwise prohibited by court order.
		[]	May call the child(ren) on the telephone times per week. The call shall last no more than minutes and shall take place between m. and m. Each parent shall provide a telephone number to the other parent, unless otherwise prohibited by court order or law.
		[]	Long distance telephone calls made by the child(ren) to a parent shall be paid for by . Each
		-	rent shall provide a telephone number to the other parent, unless otherwise ohibited by court order or law.
		[]	Other:
	3.	Costs	of Electronic Communication
		confer	ronic communication" includes telephones, electronic mail or e-mail, webcams, video- encing equipment and software or other wired or wireless technologies or other s of communication to supplement face-to face contact.
		The co	sol communication to supplement race to race contact.
		me co	ests of electronic communication shall be addressed as follows:
XI.	ACC		
XI.		CESS TO	ests of electronic communication shall be addressed as follows:
XI.		CESS TC	osts of electronic communication shall be addressed as follows: O ACTIVITIES AND EVENTS
XI.	The	CESS TC	ACTIVITIES AND EVENTS other [] Father (Choose only one) all not attend the child(ren)'s activities and events, including but not limited to, school,
XI.	The	CESS TC Sha atl	ACTIVITIES AND EVENTS Other [] Father (Choose only one) all not attend the child(ren)'s activities and events, including but not limited to, school, hletic, and extra-curricular activities and events.

[

XII. CHILD(REN)'S SAFETY The [] Mother [] Father shall follow the safety rules checked below. (Choose all that apply) [] There shall be no firearms in the home, car, or in the child(ren)'s presence during timesharing. [] No alcoholic beverages shall be consumed from twenty-four (24) hours before the child(ren) arrive until they are returned to the other parent. [] The child(ren) shall not be disciplined by corporal punishment. [] The following person(s) present a danger to the child(ren): Each parent shall ensure that during his/her time-sharing that this/these person(s): [] will not be present [] will not have contact with the child(ren) [] Other: ______ XIII. CHANGES OR MODIFICATIONS OF THE PARENTING PLAN All changes to the Safety-Focused Parenting Plan must be pursuant to a court order. **XIV. OTHER PROVISIONS**

SIGNATURE OF PARENTS

I certify that I have been open and honest in entering into this Parenting Plan. I am satisfied with this Plan and intend to be bound by it.

Dated:	
	Signature of Mother
	Printed Name:
	Address:
	City, State, Zip:
	Telephone Number:
	Fax Number:
STATE OF FLORIDA COUNTY OF	
Sworn to or affirmed and signed before me on	by
	NOTARY PUBLIC or DEPUTY CLERK
	[Print, type, or stamp commissioned name of notary or clerk.]
with this Plan and intend to be bound by it.	
Dated:	<u> </u>
	Signature of Father
	Printed Name:
	Address:
	City, State, Zip:
	Telephone Number: Fax Number:
	I ax Ivallibel.

STATE OF FLORIDA COUNTY OF	
Sworn to or affirmed and signed before me on	by
	NOTARY PUBLIC or DEPUTY CLERK
	[Print, type, or stamp commissioned name of notary or clerk.]
Personally known Produced identification Type of identification produced	
IF A NONLAWYER HELPED YOU FILL OUT THIS all blanks]	FORM, HE/SHE MUST FILL IN THE BLANKS BELOW: [fill in
-	·}
a nonlawyer, whose address is: {street}	?}, {city},
{state}, {phone}	, helped {
who is the [Choose one only] petitioner or	respondent, fill out this form