

MOTION FOR CUSTODY

NOTICE

- This form has been provided to you as a public service by the Butler County Juvenile Court.
- Although you may use this form and represent yourself in this case, you are cautioned that **if you choose to do so, you are continuing at your own risk.**
- If you have questions regarding this case, your legal rights, or your responsibilities, you are advised to contact an attorney.
- This form is to be used when you want the court to modify a previously issued custody order. If there is no case on file in this court relating to the child involved, you cannot file this motion. (see Complaint for Custody Packets)
- You must attach a copy of a legal document which identifies the parent(s) of the child. Acceptable documents include birth certificates, court orders, and administrative findings. Those documents must be legible and must be properly certified. If you are claiming to be the child's parent, the document you present must clearly identify you as the child's parent.
- If you are not legally related (related by blood or adoption) to the child you must obtain a home study. You may obtain a home study from any licensed psychologist, psychiatrist, licensed independent social worker.
- Once completed, you must file the Home Study with the clerk at least five days before the hearing date. You must pay any cost associated with the home study.

INSTRUCTIONS FOR FILING FORM

- You **MUST** complete the forms before you file them. Other than telling you the time and date of the hearing, the clerk staff will **NOT** help you in completing the forms.
- You **WILL NEED** a separate motion for each child.
- A filing fee (for each motion) for court costs **MUST** accompany each motion.
- A completed Appendix I (Juvenile Court Face Sheet) must be completed and submitted for each child
- Incomplete, soiled, damaged, or illegible forms may be rejected. Forms that are incomplete may be rejected.
- Form **MUST** be neatly typed or printed in black ink. Forms filled out in colored ink or pencil may be rejected because they can not be adequately scanned.
- Some forms **REQUIRE** a Notary. **DO NOT** sign the forms until you have taken them to a Notary Public to be acknowledged prior to filing. The clerk **WILL NOT** notarize these forms.
- You must bring the original packet to be filed with the Clerk and copies of all documents for each party on the case: one copy for you to retain for your records and a copy for each additional party on the case.

ATTENDANCE AT THE HEARING

You must attend the initial hearing regarding your request. Do not bring the child to hearing unless ordered to do so by the court.

CHILD SUPPORT

There are no forms enclosed in this packet for child support. If you are awarded custody in your case, you will have a right to collect child support from the non-custodial parents.

If you wish to have the court consider any issues having to do with child support, you must make a specific request. The easiest way to do this is to request the service of the Child Support Enforcement Agency (CSEA) on the eighth floor of the Butler County Government Services Center at 315 High Street, Hamilton, Ohio, after you are granted custody. CSEA can provide you, as the custodian, with assistance in establishing and enforcing child support.

APPENDIX I - Juvenile Court Face Sheet -

INSTRUCTIONS FOR COMPLETING FORMS

CHILD INFORMATION

Name – Print child’s last name, first name and middle initial

AKA - Note if child has any other names

SS – Print child’s social security number **DOB** – Print child’s date of birth **Gender** - Print child’s gender **Race** – Print child’s race

Birth City/State – Print the city and state child was born

Current Address – Print street number and name where child resides **City/State** – print city and state where child resides

School and Grade – Print current school and grade **School District** – print name of school district

BIOLOGICAL PARENT

Mother’s Name – Print mother’s last name, first name and middle initial

AKA – Note if mother has any other name

Address – Print mother’s street number, street name, city, state and zip code

Phone Number - Print mother’s phone number where she can be contacted **SSN** – Print mother’s social security number

DOB – Print mother’s date of birth **Gender** - Female **Race** – Print mother’s race

Custody type – Print the type of custody the mother currently hold (legal, shared parenting, shared custody)

Mother’s marital status – Print current marital status **Interpreter needed** – Checkmark if an interpreter is required

Language – If the checkmark for interpreter was mark, print which language

Father’s Name – Print father’s last name, first name and middle initial

AKA – Note if father has any other name

Address – Print father’s street number, street name, city, state and zip code

Phone Number - Print father’s phone number where he can be contacted **SSN** – Print father’s social security number

DOB – Print father’s date of birth **Gender** - Male **Race** – Print father’s race

Custody type – Print the type of custody the father currently hold (legal, shared parenting, shared custody)

Father’s marital status – Print current marital status **Interpreter needed** – Checkmark if an interpreter is required

Language – If the checkmark for interpreter was mark, print which language

NOTE:

Complete this area of the document if someone **OTHER** than the biological parents have custody of the child.

Custodian Name – Print last name, first name and middle initial

AKA – Note if custodian has any other name

Address – Print custodian’s street number, street name, city, state and zip code

Phone Number - Print custodian’s phone number where he/she can be contacted SSN – Print custodian’s social security number

DOB – Print custodian’s date of birth Gender - Print gender Race – Print race Custody type –Print the type of custody the custodian currently holds if any (temporary or legal)

Custodian’s marital status – Print current marital status Interpreter needed – Checkmark if an interpreter is required

Language – If the checkmark for interpreter was mark, please print which language Interpreter needed for whom –

Person Requesting Custody

Name – Print your last name, first name and middle initial

AKA – Note if you go by any other name

Address – Print your street number, street name, city, state and zip code

Phone Number - Print your phone number where she can be contacted SSN – Print your social security number

DOB – Print your date of birth Gender - Print your gender Race – Print your race
Custody type – Print the type of custody the you hold, if any (legal, shared parenting, shared custody)

Marital status – Print your current marital status Interpreter needed – Checkmark if an interpreter is required

Language – If the checkmark for interpreter was mark, please print which language

Legal Relationship to child – Print the relationship to child

Note: If you are not legally related (related by blood or adoption) to the child you must obtain a home study. You may obtain a home study from any licensed psychologist, psychiatrist, licensed independent social worker.

MOTION FOR CUSTODY

INSTRUCTIONS FOR COMPLETING FORMS

Case Caption: (name of the case) You should be able to find the name of the case on child custody, visitation, protection orders, abused child, neglected child, and dependent child cases most cases are usually captioned as “In the Matter of: Child’s Name.” Some child custody cases are captioned “Plaintiff’s Name vs. Defendant’s Name.” This motion should not be filed in a parentage (paternity), delinquent child, unruly child, or juvenile traffic offender case. The clerk can give you assistance if you cannot find the name of the case.

Case Number: Case Number is located on previous orders issued by the court regarding the child. The clerk can help you find the case number if you need assistance.

Your Name: Print Your Name on the form.

Type of order being requested: Print type of custody (legal custody, shared parenting, shared custody) on the form in the space provided. Do not insert details. Print the type of order that you want the court to order.

- Legal custody – physical care and full responsibility of the child (including school and medical matters)
- Shared parenting – shared custody between parents
- Shared custody- Shared custody between at least one person who **IS NOT** the parent

Name and Date of Birth: of the child involved in the case on the form. Separate motions must be filed for each child.

Names and addresses of parties:

1. **Print Your Name, Address, Zip Code, Date of Birth, and Telephone Number** on the form. Your relationship to child – Print relationship
2. **Child resides:** Print Address where child is currently living and print name of School District child is attending
3. **Print: Mother’s Name and maiden name** (if applicable), Address, Zip Code, Date of Birth, Telephone Number and School District. If you are the mother and you are filing the motion, you may print “Same as the Movant” in this space on the form.
4. **Print: Father’s Name and alias** (if applicable), Address, Zip Code, Date of Birth, Telephone Number and School District. If you are the father and you are filing the motion, you may print “Same as the Movant” in this space on the form.
5. **Print: Custodian’s Name**, Address, Zip Code, Date of Birth, Telephone Number and School District. If the custodian is the mother, you may print “Mother is Custodian” in this space on the form. If the custodian is the father, you may print “Father is Custodian” in this space on the form.

On the line that asks for your **reasons for requesting this order**, you should print a short explanation of why you are asking for custody of the child. NOTE: If you allege that you are requesting custody due to concerns that legally could be defined as **child neglect or abuse**, this court may **order** that the Butler County Children Services Agency conduct an investigation regarding the child and your complaint prior to the issuance of any custody order. **If you believe that the child in question is in danger, you should not use this form and you should immediately contact the Butler County Children Services Agency at 513-887-4026 (weekdays), 513-868-0888 (weekends), or at 1-800-325-2685 (toll-free).**

I am requesting the court to issue this order: Print what order or orders you are requesting if your motion is granted on the form. Be specific and state exactly what you want the order to do or say. For example, if you are requesting a grant of legal custody you should state "I am requesting legal custody of (child's name)." If you do not specify the order or orders or if order or orders you are requesting cannot legally be granted, your motion may be dismissed with or without a hearing.

The reason that I want the court to issue the order: Print on the form your reasons as to why the order should be issued on your request. If you do not specify your reasons or if your reasons are legally insufficient to justify the order you are requesting, your motion may be dismissed with or without a hearing.

Your Signature: Sign the Form.

The Notice of Hearing: will be filled out by the clerk.

CHILD CUSTODY AFFIDAVIT

INSTRUCTIONS FOR COMPLETING FORM

Case No.: Deputy Clerk will complete this.

In re: Print first and last name of child

The undersigned: Print Name of Person asking for custody of child

1. **Address:** Print street number and name where child is currently living
Print City, State, and zip code
2. **Name:** Print and complete all information as to where the child has resided for the past five (5) years.
3. **Name:** Print and complete all information on the persons where the child is currently living
4. Read carefully and answer truthfully to the best of your knowledge as this document is a sworn document. If appropriate, list the other State and County names, date of court contact and case number
5. Read carefully and answer truthfully to the best of your knowledge as this document is a sworn document. If appropriate, list the other State and County names, date of court contact and case number
6. Read carefully and answer truthfully to the best of your knowledge as this document is a sworn document. If appropriate, list the other State and County names, date of court contact and case number
7. **Print reasons for information to be sealed.** The Court **MAY or MAY NOT** grant the request

Affiant/Petitioner: Sign your name **in front** of a Notary Public.

Sworn to and subscribed before me: This area is to be completed by a Notary Public.

Note: a) If the packet is not notarized, it **WILL NOT** be accepted. b) If the packet has been notarized more than 30 days before submitting to the Clerk's Office, the packet **WILL NOT** be accepted. The Clerk's Office **DOES NOT** notarize these forms.

PERJURY CAUTION!

Many documents in this packet must be notarized. That means that you must state that they are true under oath. If you make a material false statement on a notarized form, this court has a duty to refer the matter to the criminal division of the office of the prosecuting attorney. If you make a false statement under oath you may be prosecuted for perjury. Perjury, under Ohio Law, is a felony.

CONSENT TO CHANGE IN CUSTODY

- This form should be completed by EACH parent who is 18 years of age or older (one for each parent) as well as by any current legal custodian or guardian.
- If the parent is under the age of 18, that parent **CANNOT** legally sign the consent form and **MUST** be summoned to appear in court.
- If this form cannot be completed by either parent or any such custodian or guardian for any reason (other than when a parent is deceased), the parent(s) must be served with notice of the case prior to the hearing (see: NOTICE) and this will **INCREASE YOUR COURT COSTS**. The **CONSENT** form must be filed with the court before the hearing.

INSTRUCTIONS FOR COMPLETING FORM

Case No.: Print Case number

In re: Print first and last name of child

The Undersigned: Print first and last name of parent or custodian agreeing to change of custody and checkmark your relationship to the child

1. **Print First and last name of child**
2. Read carefully
3. **Print First and last name of person asking for custody**
4. Read carefully
5. Read carefully

Signature: Sign your name in front of a Notary Public.

The State of: This area is to be completed by a Notary Public.

Note: a) **If the consent form is not notarized, it WILL NOT be accepted.** b) **If the consent form has been notarized more than 30 days BEFORE submitting to the Clerk's Office, the packet WILL NOT be accepted. The Clerk's Office DOES NOT notarize these forms.**

REQUEST FOR SERVICE

NOTICE

- Unless you have obtained the consent of the parents and any legal custodian of the child (see: CONSENT TO CHANGE IN CUSTODY) legal notice of this case must be served on the persons who have not signed the consent forms.
- If a person who must be served is deceased you should write "deceased" on the appropriate line on the MOTION form. (For example, if the father of the child is deceased, write "deceased" on the line next to the words "Father's Name:.")
- If you do not know where one or both of the parents live and you cannot find out their address from their family, friends or from other public information services (phone books, city directories etc.) you must serve them with notice by publication. In order to do this, you should ask for an AFFIDAVIT FOR SERVICE BY PUBLICATION from the clerk's office.
- If you do not know the identity of one of the parents, you must serve that unknown parent and you must insert that information in the AFFIDAVIT FOR SERVICE BY PUBLICATION. (For example, if you do not know the identity of the father, on the affidavit after the words "following person" insert the words "unknown father.") You will need to complete that form, *including a description of what you have done to find the person*, have it notarized, and return it to the clerk's office with the rest of your papers when you file your case.

INSTRUCTIONS FOR COMPLETING FORM

Case No. – Print Case number

In re – Print First and last name of child

To the Clerk - This area is asking the clerk to serve a party with a copy of the complaint/motion.

- If the party lives outside of Butler County, service **MUST BE ISSUED** by certified and ordinary mail. The Butler County Sheriff Department does not complete service outside of Butler County.
- If the party lives in Butler County, service can be issued by certified and ordinary mail or by personal service through the Butler County Sheriff Department.
- You **MUST** note the type of service by completing each person's name and complete address (including zip code) in the proper area
- All parties must be served

The Under signed - **Certified Mail and ordinary mail (mandatory if the person lives outside of Butler County)**

Name – Print first and last name of person to be served

Address – Print entire address including street number and name city, state, zip

The Undersigned – **personal service by the Butler County Sheriff**

Name – Print first and last name of each person to be served

Address – Print entire address including street number and name city, state, zip

The Undersigned – **service by publication**

Name – Print first and last name of each person to be served by publication (announcement in the newspaper)

Court date – Clerk will complete

Signed: Sign your first and last name

AFFIDAVIT FOR PUBLICATION

NOTICE

- If you do not know the identity of one of the parents, you must serve that unknown parent and you must insert that information in the AFFIDAVIT FOR SERVICE BY PUBLICATION. (For example, if you do not know the identity of the father, on the affidavit after the words "following person" insert the words "unknown father.") You will need to complete that form, *including a description of what you have done to find the person*, have it notarized, and return it to the clerk's office with the rest of your papers when you file your case.

INSTRUCTIONS FOR COMPLETING FORM

Case No. – Print Case number

In re – Print First and last name of child **DOB** – Print date of birth of child

The Complainant – Print your first and last name

1. **Print First and last name** of parent you are unable to locate
2. **Print the last known address** (street number, street, city, state, and zip code)
3. **Print an explanation** of the efforts you have made to try to contact the person you are requesting publication
4. Complete this same as #3 if publication is required for a second person
5. **Print mother and father's** first and last name

Complainant's Signature – Sign your name **in front** of a Notary Public

The State of – This area is to be completed by a Notary Public.

Note: a) If the affidavit is not notarized, it **WILL NOT** be accepted. b) If the affidavit has been notarized more than 30 days before submitting to the Clerk's Office, the packet **WILL NOT** be accepted. The Clerk's Office **DOES NOT** notarize these forms.