

HOW TO FILE A CUSTODY CONSENT ORDER

Muskegon County
14th Circuit Court – Family Division

Dear Parent: Please read and follow all of the following instructions carefully.

You should use this form if:

- You have a case involving the child(ren) in Muskegon’s Family Court;
- You desire to legally change or modify the custody of your child(ren);
- You and the other parent are in agreement about new custody, parenting time, and child support arrangements;
- You do not wish to use an attorney (This is called filing In Pro Per, which is representing yourself).

You should not use this form if:

- You do not already have a case involving the child(ren) in Muskegon’s Family Court;
- You and the parent do not agree about new custody, parenting time, and child support;
- You have already obtained an attorney to assist you in this matter.

Important Note: By completing this form and using the instructions, you are representing yourself in a court action regarding child custody. Failing to follow the instructions may result in your not being granted the custody you desire. Family Court Services cannot provide you with legal advice.

Completing a Custody Consent Order

1. Fill out the Custody Consent Order Worksheet (attached).
Be sure to complete all sections of the Worksheet.
Be as specific as possible.
Consider holiday plans, summer parenting times, child(ren)’s activities, etc.
Anticipate possible problems.
Both parties **MUST** sign and date the worksheet prior to submitting it to Family Court Services.
The completed Worksheet must be reviewed and approved by Family Court Services.
(Note: The worksheet is not a court order).
2. You may drop off the completed worksheet to the receptionist during business hours or mail it to:
Hall of Justice
3rd Floor, Family Court Services
990 Terrace St.
Muskegon, MI 49442

**MUSKEGON COUNTY FAMILY COURT SERVICES
WORKSHEET FOR CONSENT ORDER REGARDING CUSTODY, PARENTING TIME,
AND SUPPORT**

***Instructions:** This entire form must be completed before an order will be prepared by a caseworker.

CASE NO. _____

MOTHER _____

FATHER _____

ADDRESS _____

ADDRESS _____

CITY _____

CITY _____

STATE _____ ZIP _____

STATE _____ ZIP _____

TELEPHONE _____

TELEPHONE _____

WORK PHONE _____

WORK PHONE _____

CUSTODY

***Instructions:** Please fill in the appropriate blanks using the full name of each child.

Effective **(date)** _____, custody of the minor child(ren), namely:

_____, date of birth _____

_____, date of birth _____

_____, date of birth _____

_____, date of birth _____

will be changed as follows:

***Instructions:** Please circle option 1, 2, or 3. Legal custody means that a parent has the right to make major decisions about the child, such as major medical or educational decisions. Physical custody refers to the main living arrangement of the child. Joint means that both parents share legal and/or physical custody.

1. The **(circle one)** mother / father shall have sole legal and sole physical custody of the minor child(ren).
2. The parties shall share joint legal custody of the minor child(ren) with the primary physical custody to the **(circle one)** mother / father.

3. The parties shall share joint legal and joint physical custody of the minor child(ren).

(The following two paragraphs are standard language and will be included in your consent order.)

The residence of the of the minor child(ren) shall not be removed from the State of Michigan without the prior approval of the Court; and the custodial parent shall keep the Muskegon County Family Court Services fully informed of the current address of the child.

A parent whose custody or parenting time of a child is governed by this order shall not change the legal residence of the child except in compliance with Section 11 of the “Child Custody Act of 1970”, 1970 PA 91, MCL 722.31.

PARENTING TIME

Please choose either the “Reasonable” parenting time option or complete the “Specific” parenting time option.

REASONABLE (NON-SPECIFIC) PARENTING TIME OPTION

***Instructions: If you desire a parenting time schedule that is not specific and based on only the agreement of the parents, please complete this section. (Reasonable parenting time CANNOT be enforced by Family Court Services.)**

Our reasonable parenting time accounts for _____ overnights per year for the mother and _____ overnights per year for the father.

That the **(circle one)** mother / father / parents shall be awarded reasonable parenting time with the minor child(ren) of the parties. It will be assumed that the parties will be able to agree on what is reasonable. Parenting time may from time to time change, depending upon the circumstances of the parents and the child(ren) involved.

***Instructions: If you desire a parenting time schedule that is specifically listed, please complete this section. Feel free to include a separate sheet if you have developed your own schedule. (Specific parenting time CAN be enforced by Family Court Services.) Choose which options you would like, you do not have to use them all.**

SPECIFIC PARENTING TIME OPTION

Our specific parenting time schedule accounts for _____ overnights per year for the mother and _____ overnights per year for the father.

The **(circle one)** mother / father shall have specific parenting time with the minor child(ren) as follows:

- a. Alternating weekends from _____ Friday until _____ Sunday.
- b. On _____ from _____ until _____ .
- c. Holiday parenting time as follows:

Odd numbered years: New Year's Day, Memorial Day, Labor Day, Christmas Eve and New Year's Eve.

Even number years: Easter Sunday, Independence Day, Thanksgiving Day and Christmas Day.

Mother's Day to the Mother; Father's Day to the Father.

Holiday parenting time hours shall be from _____ a.m. until _____ p.m.

Holidays shall take precedence over regularly scheduled parenting times.

- d. _____ of Christmas break;
- e. _____ of Spring break;
- f. Summer time parenting time shall be as follows:

(Circle your choice.)

- 1. Alternating weeks;
- 2. Alternating two week periods;
- 3. Entire summer with alternating weekend parenting time to _____.
- 4. _____ weeks with _____ days notice to _____;
- 5. Write in how you want it scheduled. _____

- g. Other parenting time with the minor child(ren) of the parties as mutually agreed upon between the parties.

Except otherwise provided in this Order, neither parent shall exercise parenting time in a foreign country/nation that is not a party to the Hague Convention on the Civil Aspects of International Child Abduction.

CHILD SUPPORT

***Instruction: Choose option 1 or 2 and complete.**

1. IT IS HEREBY ORDERED that effective **(date)**_____ neither party shall have the obligation to pay child support by mutual agreement of the parties.

2. IT IS HEREBY ORDERED that effective **(date)**_____ the **(circle one)** mother / father shall pay \$_____ per month, being \$_____ per child, for the ____ minor child(ren) of the parties. This sum shall be paid to and distributed by the Michigan State Disbursement Unit.

***Please see attached Uniform Child Support Order for exact format and wording.**

ARREARS

***Instructions: Choose and complete option 1, 2, and/or 3 if necessary.**

IT IS HEREBY ORDERED that all arrears owed to the State of Michigan are preserved. All handling fees are preserved. All other arrears are preserved unless specifically stated.

1. The mother shall pay \$_____ per month toward the arrears which have accrued in this matter.

2. The father shall pay \$_____ per month toward the arrears which have accrued in this matter.

3. All remaining arrears owed to the **(circle one)** mother / father shall be forgiven.

IMPRISONMENT

(The following paragraph is standard language and will be included in your consent order.)

IT IS HEREBY ORDERED that in the event that the payer becomes incarcerated for 90 days or more, the payers child support shall be suspended effective the date of incarceration, unless incarceration is due to failure to pay child support. The Friend of the Court shall provide the payee with notice and an opportunity to object to the suspension of the payers child support. This provision shall have the same force and effect of a Petition for Modification and satisfies the requirements of MCL 552.603. Following incarceration, the reinstatement date for child support shall be the date of release from incarceration, unless the payer is able to provide sufficient

documentation of participation in a re-entry/rehabilitative program that he/she participates in directly upon release from incarceration that causes the payer to have minimal or no income or assets, in which case the effective date of child support shall be the end date of the re-entry/rehabilitative program.

MEDICAL AND DENTAL INSURANCE

***Instructions: Choose option 1 or 2.**

1. IT IS HEREBY ORDERED that by agreement of the parties, the **(circle one)** father / mother shall provide health care coverage for the minor child(ren). When insurance is obtained, the party obtaining such insurance shall immediately provide the other party with useable proof of such insurance.

2. IT IS HEREBY ORDERED that both parties shall provide health care insurance if it is available at a reasonable cost as a benefit of employment or as an option for dependents on a current health insurance policy. When insurance is obtained, the party obtaining such insurance shall immediately provide the other party with useable proof of such insurance.

***Please see attached Uniform Child Support Order for exact format and wording.**

ORDINARY HEALTH CARE EXPENSE

(The following paragraphs are standard language and will be included in your consent order.)

An ordinary health care expense includes treatments, services, equipment, medicines, preventative care, etc. associated with oral, visual, psychological, medical and other related needs, provided or prescribed by a health care professional including health insurance co-payments, deductibles, uninsured and other health care related costs for children eligible for support in this case. Ordinary health care expenses do not include first-aid supplies, over-the-counter medication, vitamins, etc.

Ordinary health care expenses shall continue until each child reaches the age of 18 or graduates from high school, whichever is later, but no longer than 19 ½. Each child must be attending school on a full-time basis with a reasonable expectation of graduating. Family Court Services may redirect the ordinary health care expense upon certification or decertification of the case by the Department of Human Services.

***Instructions: If you wish to have Ordinary Health Care costs added, in addition to the base child support amount, please fill in the desired amounts below.**

IT IS HEREBY ORDERED effective **(date that support is effective)** _____, the payor of support shall pay to the payee of support through the Michigan State Disbursement Unit, the amount of ordinary health care expenses listed below for the number of children being supported.

The number of Children and Amount of Ordinary Health Care Expense per Month.

\$ _____ for five (5) or more children
\$ _____ for four (4) children
\$ _____ for three (3) children
\$ _____ for two (2) children
\$ _____ for one (1) child

The annual ordinary health care expense amount within a calendar year in this case is \$357.00 per child. The payee must provide to the Family Court Services proof of ordinary health care expenses exceeding the annual ordinary health care amount within a calendar year before filing a demand for medical payment.

EXTRAORDINARY HEALTH CARE EXPENSE

(The following paragraphs are standard language and will be included in your consent order.)

Extraordinary health care expenses include uninsured medical and health care-related expenditures that exceed the annual ordinary health care expenses set forth above.

***Instructions: Please complete the following paragraph.**

IT IS HEREBY ORDERED that the **(circle one)** mother / father shall pay ____ % of all extraordinary health care expenses that are incurred on behalf of the minor child(ren).

CONTINUATION OF PRIOR ORDERS

(The following is standard language and will be included in your consent order.)

IT IS HEREBY ORDERED that this order supersedes all prior orders in this case and all continuing provisions are restated in this order.

ACKNOWLEDGMENT OF REQUEST FOR CUSTODY CHANGE

We agree to this proposed order and understand its provisions. We request that Family Court Services prepare this order for our signatures.

We understand that once the order is signed by the Judge, we are bound by its provisions.

If the parties cannot agree upon the changes in this order, the party desiring any changes will need to petition the court and may need an attorney to do so.

Neither party has coerced the other into requesting this order.

We each have the option to seek legal counsel to complete this custody change. If we choose not to consult attorneys, we accept responsibility for that choice.

We agree that the changes do not **harm** our child(ren). These changes will enhance our **co-parenting** relationship.

We acknowledge that we have taken into consideration the “best interest” factors under the Child Custody Act (MCL 722.23) which are attached.

I hereby request services pursuant to the title IV-D of the social security act.

MOTHER

Date_____

FATHER

Date_____

05/15 SMV

CHILD CUSTODY ACT OF 1970 (EXCERPT)
Act 91 of 1970

722.23 “Best interests of the child” defined.

Sec. 3.

As used in this act, “best interests of the child” means the sum total of the following factors to be considered, evaluated, and determined by the court:

(a) The love, affection, and other emotional ties existing between the parties involved and the child.

(b) The capacity and disposition of the parties involved to give the child love, affection, and guidance and to continue the education and raising of the child in his or her religion or creed, if any.

(c) The capacity and disposition of the parties involved to provide the child with food, clothing, medical care or other remedial care recognized and permitted under the laws of this state in place of medical care, and other material needs.

(d) The length of time the child has lived in a stable, satisfactory environment, and the desirability of maintaining continuity.

(e) The permanence, as a family unit, of the existing or proposed custodial home or homes.

(f) The moral fitness of the parties involved.

(g) The mental and physical health of the parties involved.

(h) The home, school, and community record of the child.

(i) The reasonable preference of the child, if the court considers the child to be of sufficient age to express preference.

(j) The willingness and ability of each of the parties to facilitate and encourage a close and continuing parent-child relationship between the child and the other parent or the child and the parents.

(k) Domestic violence, regardless of whether the violence was directed against or witnessed by the child.

(l) Any other factor considered by the court to be relevant to a particular child custody dispute.

If it is completed properly, a Family Court Specialist will schedule a meeting for the parties to appear and review the court order reflecting your agreement, prior to signing. Each party signs the order and the Family Court Specialist will submit it to the judge for signature. A copy will then be mailed to each party. (Note it is not considered a court order until the judge signs it).

If it is not completed properly, a Family Court Specialist will mail the worksheet back to you with instructions on which portions need correction, and also note any problems with your proposed plan. To resubmit your worksheet, simply follow the steps above.

Important Note

If you receive benefits from the Department of Human Services (DHS), it is your responsibility to immediately inform your DHS caseworker of your new order after the judge signs it. Any monies that are owed to DHS for public assistance or childbirth expenses must be paid back. If you receive benefits from DHS, child support must be set according to Michigan Support Guidelines.

Thank you for using Family Court Services!