

**This is a private record.**

\_\_\_\_\_  
My Name

\_\_\_\_\_  
Address

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

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

I am the  Petitioner  
 Respondent  
 Attorney for the  Petitioner  Respondent and my Utah Bar number is \_\_\_\_\_

In the District Court of Utah

\_\_\_\_\_ Judicial District \_\_\_\_\_ County

Court Address \_\_\_\_\_

	<b>Motion to Appoint a Parent Coordinator</b>
_____ Petitioner	_____ Case Number
v.	_____ Judge
_____ Respondent	_____ Commissioner

**Instructions:**

- You must complete this form before you file it. The judicial services representative cannot complete this form for you. Use the Checklist to help you understand and complete this form.
- Keep a copy of all documents for your records.
- Attend all court hearings.
- Attach:
  - Additional pages as needed to complete paragraphs that don't have enough space. Write the paragraph number on the additional page.
  - Any documents referred to in this document.

- o A Statement of Qualifications form for any professional named in Paragraph (2).
- o Stipulation to Appoint a Parent Coordinator (if the other party agrees to your motion)

[ ] By and through my attorney, (Attorney, check here if you are appearing for your client.)

I say as follows:

(1) This action involves a dispute about child custody or parent-time, and I move that the court appoint a parent coordinator.

(2) I propose that the court appoint one of the following: (Print the name of any professionals you are willing to have appointed as parent coordinator. For each person named, attach a Statement of Qualifications completed by that person. If the motion is granted, the court will appoint a parent coordinator suggested by you or the other party or one selected by the court.)

(a) \_\_\_\_\_

(b) \_\_\_\_\_

(c) \_\_\_\_\_

(3) The court should order a minimum of \_\_\_\_\_ hours (not less than 4 hours) of consultation with the parent coordinator, unless a parenting plan is finalized sooner, because:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(4) The Petitioner should pay \_\_\_\_\_ % of the parent coordinator’s fee and the Respondent should pay \_\_\_\_\_ % because:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(5) The parent coordinator’s role is to:

- elicit cooperation and agreement between the parents;

- offer advice or guidance about specific decisions;
- help the parents to create, revise, or clarify their parenting plan;
- make suggestions to the parents that are in the best interests of the children and are solutions and compromises that the parents can accept and implement; and
- diffuse conflict and stimulate parental communication.

The parent coordinator's role should be limited as follows:

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- (6) The proposed parent coordinators have the credentials and other qualifications required by Rule 4-509 and the person appointed should comply with the requirements of that rule.
- (7) The parent coordinator should notify the court of the status of the parent coordinator process at three month intervals or earlier upon termination.

I declare under penalty of Utah Code Section 78B-5-705 that everything stated in this document is true and correct.

\_\_\_\_\_ Sign here ► \_\_\_\_\_  
 Date  
 \_\_\_\_\_  
 Typed or Printed Name \_\_\_\_\_

### Certificate of Service

I certify that I served a copy of this document on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		

Sign here ► \_\_\_\_\_

Date \_\_\_\_\_

Typed or printed name \_\_\_\_\_