

Your Name: _____

Mailing Address: _____

Telephone: _____ Message phone: _____ Email: _____

NOTE: If for any reason you do not wish the other party to know your physical address, you must still provide a mailing address so that the court and the other party can serve you by mail.

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA

AT _____
City or Town where the Court is located

_____)
Plaintiff,)
)
v.)
)
_____)
Defendant.)
_____)

Your Case No. _____

MOTION and AFFIDAVIT FOR INTERIM CUSTODY & SUPPORT
AS 25.24.140 and AS 25.20.010 et seq.

NOTE: If you serve this motion with the Complaint, the other parent's opposition is due on the same day as the Answer, which is 20 days after service of Complaint. If you serve this motion after the Complaint, the opposition is due with the Answer OR after 10 days + 3 if mailed – whichever is later. You have the right to file a reply 5 days (+3 for mailing) after a copy of the opposition is mailed to you. For more information, see www.courts.alaska.gov/shc/family/motions.htm or call 866-279-0851 or 907-264-0851.

I, _____, request the following interim custody and support order.
Print your full name here

1. INTERIM CUSTODY & VISITATION

A. Legal Custody Legal custody refers to decision making authority such as matters relating to health, education or religion of the child(ren). There are 2 kinds of legal custody: joint and sole. Joint legal custody means both parents share the decision making because they can communicate about the children, even though they may not get along otherwise. Joint legal is the most common type of legal custody awarded by courts. Sole legal custody means one parent makes decisions about the child(ren) because there is no way that the parents can communicate about the child(ren) or one parent is unfit due to severe mental illness, substance abuse or domestic abuse issues. However, with sole legal, both parents usually have access to

school and medical records and neither parent can move out of the state with the children without permission from the court or the other parent.

Because it is in the best interests of the children, I request that I be awarded:

- Joint Legal Custody (*the parents share the decision making about the child(ren)*).
- Sole Legal Custody (*one parent makes decisions about the child(ren)'s upbringing and does not have to consult with the other parent*).

B. Physical Custody *Physical custody describes the child(ren)'s schedule. If the children are with each parent more than 110 over nights within 1 year, you have a shared custody schedule. If one parent has 109 over nights or less, he or she has a visitation schedule and the other parent has primary custody.*

I believe it is in the best interests of the child(ren) for the court to enter: (*check one box*)

- the schedule on the attached Custody & Visitation Plan, SHC-1120 [Word](#) | [PDF](#)
- the schedule on the attached Proposed Parenting Plan, SHC-1127 [Word](#) | [PDF](#) or
- the following schedule: (*choose i, ii, or iii*)

i. Shared Physical Custody The child(ren) will have 110 or more overnights with each of us and I request the following schedule:

Visitation during the week: as described on the attached Weekly Scheduling Chart, SHC-1132 [Word](#) | [PDF](#) or as follows: _____

Summer Vacation: _____

Holidays & Birthdays: _____

Weekends: _____

Other: _____

ii. Primary Physical Custody The child(ren) will have 256 or more overnights with me and be with the other parent for 109 overnights or less at these times:

Visitation during the week: as described on the attached Weekly Scheduling Chart, SHC-1132 [Word](#) | [PDF](#) or as follows: _____

Summer Vacation: _____

Holidays & Birthdays: _____

Weekends: _____

Other: _____

iii. **Other Custody Arrangement** as follows: _____

C. Safety Concern - *A history of domestic violence can significantly affect the outcome of the custody issues in your case. In short, there is a presumption that the perpetrator of domestic violence may not get custody. The presumption may be overcome by meeting specific legal requirements. You are strongly encouraged to [talk to an attorney](#) about how this may affect your case.*

I am concerned about my safety or the safety of the children when with the other parent. Therefore, I request that visitation be restricted as follows: _____

2. CHILD(REN)'S BEST INTERESTS - I believe that my proposed schedule is in the child(ren)'s best interest as described in my attached Best Interests Affidavit, SHC-1125 [Word](#) | [PDF](#), or as follows:

3. INTERIM CHILD SUPPORT - I request an interim Child Support Order according to Civil Rule 90.3, including medical and dental support. **I have attached:**
 my *Child Support Guidelines Affidavit*, [DR-305](#) [Fill-In PDF],
 a proposed *Order for Child Support*, [DR-300](#) [Fill-In PDF] marked "Interim."

4. Has either CSSD or the court ordered anyone to pay child support?
 No Yes, Mother Father, or other _____ has been ordered to pay child support. (*Please attach a copy of that order if you have it.*)

5. Has anyone applied for public benefits (ATAP, TANF, Food stamps etc.) to support this child?
 No Yes, who? _____

6. **OTHER RELIEF** - I request other temporary relief as follows: _____

7. **I want a hearing on this *Motion*.**

8. **I have attached the following REQUIRED documents:**

- Child Support Guidelines Affidavit*, [DR-305](#) [Fill-In PDF]
- Proposed Order for Child Support*, [DR-300](#) [Fill-In PDF] (Mark "Interim" and fill out as if the court grants, but DO NOT sign).
- Proposed Custody Order* (1 page), SHC-1103 [Word](#) | [PDF](#) (Mark "Interim" and fill out as if the court grants the plan you chose, but DO NOT sign.)
- Notice of Motion*, SHC-1630 [Word](#) | [PDF](#) (Required if you are filing this motion with a *Complaint for Divorce or Complaint for Custody*)

9. **I have attached the following supplemental documents:**

- Proposed Custody and Visitation Plan* (This is helpful if you want to be more specific about the visitation schedule than in the space in the *Proposed Custody Order*, SHC-1103; Choose 1 below)
 - *Custody & Visitation Plan* (long - 5 pages), SHC-1120 [Word](#) | [PDF](#)
 - *Custody & Visitation Plan* (short – 1 page), SHC-1122 [Word](#) | [PDF](#)
 - *Parenting Plan* (23 pages), SHC-1127 [Word](#) | [PDF](#)
- Weekly Scheduling Chart* (1 page), SHC-1132 [Word](#) | [PDF](#)
- Best Interest Affidavit*, SHC-1125 [Word](#) | [PDF](#) (supports my *Custody and Visitation Plan*)
- Other: _____

I swear or affirm that the above facts and statements are true to the best of my knowledge.

Your Signature (In blue ink if possible)

Subscribed and sworn to or affirmed before me at _____, Alaska
on _____
Date *Name of City, Town or Village*

Notary Public or other person authorized to administer oaths.
My commission expires on _____

CERTIFICATE OF SERVICE

I certify that on _____, I gave a copy of the *Motion & Affidavit for Interim Custody & Support* and papers listed in Nos. 8-9 to the following:
 Opposing Party _____ Opposing Lawyer _____
 Other Party _____
by mail hand delivery served with the *Complaint* (if served with the *Complaint* you cannot show a date of service here) Other _____

Your signature: _____