COURT FILE NUMBER:

**SUPREME COURT OF PRINCE EDWARD ISLAND**

**FAMILY SECTION**

Before the Honourable      , 20

BETWEEN:

APPLICANT

AND:

RESPONDENT

 **ORDER**

1. Parenting Arrangements Assessment: THIS COURT ORDERS that a Parenting Arrangements Assessment shall be conducted on the terms set out in the attached Schedule, and the report from the assessment shall be filed with the Court, pursuant to Rule **Select Rule** of the *Rules of Civil Procedure* and Section 38 of the *Children’s Law Act,* RSPEI 1988, Cap. C-6.1.

     , 20

*(Date)*

|  |
| --- |
|  |

      , J.

      *v*

Court File Number.:

**SCHEDULE**

1. This Court authorizes that a clinician of the Family Court Conciliation Office (“the clinician”) shall conduct a:

[ ]  Parenting Arrangements Assessment; or

[ ]  Updated Parenting Arrangements Assessment. Date(s) of previous assessment(s):

with respect to the following child/children:

|  |  |
| --- | --- |
| Child’s full legal name | Birthdate |
|       |       |
|       |       |
|       |       |

1. Does this Parenting Arrangements Assessment need to be expedited?

[ ]  No. [ ]  Yes. If yes, state reasons:

1. Provide the parties’ contact information. The parties shall inform the Family Court Conciliation Office immediately of any changes to their contact information:

|  |  |
| --- | --- |
| Applicant | Respondent |
| Name:      Address:      Telephone:       Email:       | Name:      Address:      Telephone:       Email:       |

1. Provide the contact information for the parties’ lawyers, if applicable:

|  |  |
| --- | --- |
| Applicant’s Lawyer (if applicable) | Respondent’s Lawyer (if applicable) |
| Name:      Telephone:       Email:       | Name:      Telephone:       Email:       |

1. If the child/children have a Children’s Lawyer, provide the Children’s Lawyer’s contact information:

|  |
| --- |
| Children’s Lawyer (if applicable) |
| Name:      Telephone:      Email:       |

1. The reasons for this referral for a Parenting Arrangements Assessment are *(to be completed by a judge)*:

|  |  |  |
| --- | --- | --- |
| a) [ ]  Concerns regarding parenting ability.Concern is raised by:[ ]  Applicant[ ]  Respondent[ ]  Both | b) [ ]  Concerns that parent has been absent from child(ren)’s life for an extended period of time. Concern is raised by:[ ]  Applicant[ ]  Respondent[ ]  Both | c) [ ]  Concerns regarding abuse of child(ren) (physical, sexual, emotional).Concern is raised by:[ ]  Applicant[ ]  Respondent[ ]  Both |
| d) [ ]  Concerns regarding history of alcohol/drug abuse.Concern is raised by:[ ]  Applicant[ ]  Respondent[ ]  Both | e) [ ]  Unresolved conflict between parents.Concern is raised by:[ ]  Applicant[ ]  Respondent[ ]  Both | f) [ ]  Concerns regarding emotional stability of parent.Concern is raised by:[ ]  Applicant[ ]  Respondent[ ]  Both |
| g) [ ]  Concerns regarding partner abuse.Concern is raised by:[ ]  Applicant[ ]  Respondent[ ]  Both | h) [ ]  Concerns regarding abduction.Concern is raised by:[ ]  Applicant[ ]  Respondent[ ]  Both | i) [ ]  Concerns regarding parent withholding parenting time.Concern is raised by:[ ]  Applicant[ ]  Respondent[ ]  Both |
| j) [ ]  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

1. The Court requests that the clinician provide detailed information with respect to:
2. The clinician may also obtain, assess, and report on other relevant information that the clinician determines to be necessary or beneficial for the Parenting Arrangements Assessment.

|  |
| --- |
|  |

      , J.

|  |  |
| --- | --- |
|       *v*       | Court File Number:       |
|     |  SUPREME COURT OFPRINCE EDWARD ISLANDPROCEEDINGS COMMENCED AT      , IN Please Choose COUNTY, PROVINCE OF PRINCE EDWARD ISLAND **ORDER**   |