

Form 5

Statement of arrangements for children

Matrimonial Causes Rules 2005 Rules 5(5) and 33(1)

**IN THE ROYAL COURT OF JERSEY
(Family Division)**

File No:

BETWEEN

PETITIONER

AND

RESPONDENT

AND

CO-RESPONDENT

TO THE PETITIONER

You must complete this Form if you or the respondent have any children under 18.

If you husband/wife does not agree with the proposals he/she will have an opportunity at a later stage to state why he/she does not agree and will be able to make his/her own proposals.

You should take or send the completed form, signed by you (and, if agreement is reached, by your husband/wife) together with a copy to the Judicial Greffe when you issue your petition.

The Court will only make an order if it considers that an order will be better for the child(ren) than no order.

If you wish to apply for any of the orders which may be available to you under Article 10 of the Children (Jersey) Law 2002 you are advised to see an advocate or solicitor. A list of advocates and solicitors can be obtained from the Judicial Greffe.

TO THE RESPONDENT

The petitioner has completed this Form which will be sent to the Court at the same time that the petition is filed.

Please read all parts of the Form carefully.

If you agree with the arrangements and proposals for the children you should sign at the end of the Form.

Please use black ink. You should return the Form to the petitioner, or his/her advocate or solicitor.

If you do not agree with all or some of the arrangements or proposals you will be given the opportunity of saying so when the petition is served on you.

SECTION A - DETAILS OF CHILDREN (Please read 1, 2 and 3 before you complete this section)

1. **Children of both parties** *(Give details only of any children born to you and the respondent or adopted by you both)*

Forenames	Surname	M/F	Date of Birth
(i)			
(ii)			
(iii)			
(iv)			
(v)			

2. **Other children of the family** *(Give details of any other children treated by both of you as children of the family: for example your own or the respondent's)*

Forenames	Surname	M/F	Date of Birth
(i)			
(ii)			
(iii)			
(iv)			
(v)			

3. **Other children who are not children of the family** *(Give details of any children born to you or the respondent that have not been treated as children of the family or adopted by you both)*

Forenames	Surname	M/F	Date of Birth
(i)			
(ii)			
(iii)			
(iv)			
(v)			

SECTION B - ARRANGEMENTS FOR THE CHILDREN OF THE FAMILY

This section must be completed. Give details for each child if arrangements are different. (If necessary, continue on another sheet and attach it to this Form).

4. **Home details** *(please tick the appropriate boxes)*

(a) The address at which the children now live.	
(b) Give the names of all other persons living with the children including your husband/wife if he/she lives there. State their relationship to the children.	
(c) Will there be any change in these arrangements?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details)</i>

5. Education and training details *(please tick the appropriate boxes)*

(a) Give the name of the school, college or place of training attended by each child.	
(b) Do the children have any special educational needs?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details)</i>
(c) Is the school, college or place of training, fee-paying?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details of how much the fees are per term/year)</i>
(d) Are fees being regularly paid?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details)</i>
(e) Will there be any change in these arrangements?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details)</i>

6. Childcare details *(please tick appropriate boxes)*

(a) Which parent looks after the children from day to day? If responsibility is shared, please give details	
(b) Does that parent go out to work?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details of his/her hours of work)</i>

(c) Does someone look after the children when the parent is not there?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details)</i>
(d) Who looks after the children during school holidays?	
(e) Will there be any change in these arrangements?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details)</i>

7. Maintenance *(please tick the appropriate boxes)*

(a) Does your husband/wife pay towards the upkeep of the children? If there is another source of maintenance, please specify.	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details of how much)</i>
(b) Is the payment made under a court order?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details including the name of the court)</i>
(c) Do the children have any special educational needs?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details including the name of the court)</i>
(d) Has maintenance for the children been agreed?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details)</i>

(e) If not, will you be applying for a child maintenance order?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details)</i>
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8. Details for contact with the children *(please tick appropriate box)*

(a) Do the children see your husband/wife?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details)</i>
(b) Do the children ever stay with your husband/wife?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details)</i>
(c) Will there be any change to these arrangements? Please give details of the proposed arrangements for contact and residence.	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details)</i>

9. Details of health *(please tick appropriate box)*

(a) Are the children generally in good health?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details of any serious disability or chronic illness)</i>
(b) Do the children have any special health needs?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details of the care needed and how it is to be provided)</i>

10. Details of care and other court proceedings *(please tick appropriate box)*

(a) Are the children in the care of Health and Social Services or under the supervision of a Children's Officer or Probation Officer?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give detail including any court proceedings)</i>
(b) Are any of the children on the Child Protection Register?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details and, if known, the date of registration)</i>
(c) Are there or have there been any proceedings in any court involving the children, for example adoption, custody/residence, access/contact, care, supervision or maintenance?	<input type="checkbox"/> No <input type="checkbox"/> Yes <i>(please give details and send a copy of any order to the Court)</i>

SECTION C - TO THE PETITIONER

Mediation

If you and your husband/wife do not agree about arrangements for the child(ren), would you agree to discuss the matter with a mediator and your husband/wife?

☐ No ☐ Yes

Declaration

I declare that the information I have given is correct and complete to the best of my knowledge.

Signed

(Petitioner)

Date

SECTION D - TO THE RESPONDENT

Mediation

If you and your husband/wife do not agree about arrangements for the child(ren), would you agree to discuss the matter with a mediator and your husband/wife?

☐ No ☐ Yes

Declaration

I agree with the arrangements and proposals contained in sections A and B of this Form.

Signed

(Respondent)

Date