

# CUSTODY COMPLAINT

## INSTRUCTIONS

***IT IS STRONGLY RECOMMENDED THAT YOU  
CONSULT AN ATTORNEY***

## DISCLAIMER

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***PLEASE NOTE: A free custody clinic is available for eligible individuals through MidPenn Legal Services. At each monthly clinic, attorneys explain the custody process, help you prepare the custody forms, and file the forms on your behalf. Although the attorneys are not representing you, the service is an excellent way to ensure that your forms are completed correctly. For more information, please telephone (717) 232-0581.***

# INSTRUCTIONS FOR FILING A CUSTODY COMPLAINT

## PLEASE TAKE THE TIME TO READ THESE INSTRUCTIONS CAREFULLY BEFORE FILING A CUSTODY COMPLAINT

**IF YOU HAVE A CUSTODY ORDER IN PLACE, DO NOT USE THESE FORMS. YOU MUST USE THE FORMS FOR THE MODIFICATION OF AN EXISTING CUSTODY ORDER. If there is currently a custody order in place involving this/these child/ren and you are not a party in that custody case, you may be required to ask the court for permission to join the existing custody case BY FILING A PETITION TO INTERVENE. The Self-Help Center does not have a form for a Petition to Intervene. If that is the situation, you are strongly recommended to hire an attorney.**

### A. OVERVIEW OF PENNSYLVANIA CUSTODY LAW

1. Child support payments and custody arrangements are **separate** proceedings involving different forms and procedures. For example, a parent who does not pay child support may still have a right to have some form of custody of the child(ren). You must separately file for child support. Child support matters are handled through the Domestic Relations Office, 25 South Front Street, 8th Floor, Harrisburg, PA 17101.
2. In child custody matters, the courts will focus on the “**best interest of the child.**” In general, both parents have a right to have a relationship with their child(ren). A parent who does not have primary physical custody will usually have partial physical custody, shared physical custody, or supervised physical custody (when a parent visits the child under the supervision of another care provider).
3. A **court order** is not needed if you are satisfied with the current arrangement. Without a court order, both parents have equal rights to custody and either parent can lawfully take physical custody of the child(ren) at any time. The situation can be flexible. With a court order, either parent who disobeys the custody order may be held in contempt of court, charged with a crime, fined, or jailed. With a court order, you gain some certainty but lose flexibility.
4. **A custody complaint should be filed in the county where the child(ren) has/have resided for the previous six (6) months.**
5. If there is a health and safety issue involving the child(ren), a party may file an Emergency Petition for Special Relief along with the Custody Complaint. **However**, please carefully consider this before doing so. Not every custody dispute is an “emergency” and simply alleging that the other parent has the child(ren) and will not permit the other parent to see the child(ren) **DOES NOT** constitute an emergency. Only when there are serious, factually provable risks to the health and safety of the child(ren) will the court consider granting any type of relief before the parties appear before the Custody Conference Officer.

#### **The following individuals may file an action for any form of physical or legal custody:**

- A parent of the child(ren). (23 Pa.C.S. §5324(1))
- A person who stands in *loco parentis* to the child. (23 Pa.C.S. §5324(2))
- A grandparent of the child who is not in *loco parentis* to the child:
  - (i) whose relationship with the child began either with the consent of a parent of the child(ren) or under a court order; and
  - (ii) who assumes or is willing to assume responsibility for the child(ren); and
  - (iii) when one of the following conditions is met:
    - (A) the child(ren) has/have been determined to be a dependent child under 42 Pa.C.S. Ch. 63 (relating to juvenile matters);
    - (B) the child(ren) is/are substantially at risk due to parental abuse, neglect, drug or alcohol abuse or incapacity; or

- (C) the child(ren) has/have, for a period of at least 12 consecutive months, resided with the grandparent, excluding brief temporary absences of the child(ren) from the home, and is/are removed from the home by the parents, in which case the action must be filed within six months after the removal of the child/ren from the home. (23 Pa.C.S. §5324 (3))

- An individual who has established that:
  - (i) The individual has assumed or is willing to assume responsibility for the child;
  - (ii) The individual has a sustained, substantial, and sincere interest in the welfare of the child;  
AND
  - (iii) Neither parent has any form of care and control of the child.

All three must apply and this does not apply if a dependency proceeding involving the child has been initiated or is ongoing OR there is an order of permanent legal custody under 42 Pa.C.S. §6351(a)(2.1) or (f.1)(3) (relating to disposition of dependent child). (23 Pa.C.S. §5324 (4-5))

**In addition to the situations set forth above, grandparents and great-grandparents may file an action for partial physical custody or supervised physical custody when:**

- The parent of the child is deceased or
- The relationship with the child began either with the consent of the parent of the child or under a court order and where the parents of the child:
  - (i) have commenced a proceeding for custody and
  - (ii) do not agree as to whether the grandparents or great-grandparents should have custody or
- When the child has, for a period of at least 12 consecutive months, resided with the grandparent or great-grandparent, excluding brief temporary absences of the child from the home, and is removed from the home by the parents. In this situation, an action must be filed within six months of the removal of the child from the home. (23 Pa.C.S. §5325).

**B. DEFINITIONS**

Below are some definitions of legal terms that you may encounter in filing for custody. **Please review these definitions carefully.**

- Custody – means the legal right to keep, control, guard, care for and preserve a child and includes the terms ‘legal custody’, ‘physical custody’ and ‘shared custody’.
- Legal Custody – means the right to make major decisions on behalf of the child including but not limited to medical, religious, and educational decisions.
- Physical Custody – means the actual physical possession and control of the child.
- Sole Legal Custody -- means the right of one individual to exclusive legal custody of the child.
- Shared Legal Custody -- means the right of more than one individual to legal custody of the child.
- Partial Physical Custody -- means the right to assume physical custody of the child for less than a majority of the time.
- Primary Physical Custody -- means the right to assume physical custody of the child for the majority of the time.
- Shared Physical Custody -- means the right of more than one individual to assume physical custody of the child, each having significant periods of physical custodial time with the child.
- Sole Physical Custody -- means the right of one individual to the exclusive physical custody of the child.

- Supervised Physical Custody -- means the custodial time during which an agency or an adult designated by the court or agreed upon by the parties monitors the interaction between the child and the individual with those rights.

## C. STEPS IN THE CUSTODY PROCESS

### PLEASE NOTE:

**IF YOU DO NOT HAVE AN ADDRESS FOR ANY OF THE OTHER PARTY(IES), YOU SHOULD NOT FILE THESE FORMS BUT CONSULT AN ATTORNEY TO LEARN ABOUT OTHER OPTIONS.**

**BOTH BIOLOGICAL PARENTS MUST BE NAMED AS A PARTY TO THE ACTION UNLESS A PARENT IS DECEASED, THEIR PARENTAL RIGHTS HAVE BEEN TERMINATED BY AN ORDER OF COURT OR THE IDENTITY OF THE BIOLOGICAL PARENT IS UNKNOWN.**

IF YOU ARE PURSUING CUSTODY OF MORE THAN ONE CHILD AND THE CHILDREN HAVE DIFFERENT SETS OF PARENTS, A SEPARATE COMPLAINT MUST BE FILED FOR EACH SET OF PARENTS. FOR EXAMPLE, IF CHILD #1 HAS PARENT A AND PARENT B AND CHILD #2 HAS PARENT A AND PARENT C, YOU NEED TO FILE TWO SEPARATE COMPLAINTS – ONE COMPLAINT IS FOR CHILD #1 (PARENT A VS. PARENT B) AND ONE COMPLAINT IS FOR CHILD #2 (PARENT A VS. PARENT C).

1. **Read the instructions carefully and print legibly.**
2. You are required to complete 4 forms – Custody Complaint, Confidential Information Form, Self-Represented Party Entry of Appearance, and Criminal Record/Abuse History Verification.  
**If you are a victim of abuse and the other party is the abuser and you do not want the other party to know your contact information, you must also complete the Confidential Information Form (CIF) Abuse Victim Addendum. An abuse victim is defined as a person for whom a protection order has been granted by a Court. This form is to be filed with the Prothonotary and should not be sent to the other party(ies). This contact information will only be available to the Court and Court staff. If you print out the Custody Complaint packet from the Self Help Center page of the Dauphin County website, the Confidential Information Form and the Confidential Information Form Abuse Victim Addendum are not included. You must print out these forms in accordance with the instructions appearing on the webpage.**
3. Make two (2) copies of the completed forms. Therefore, you will have three (3) total (the original and two (2) copies).
4. Take the original and the copies to the Dauphin County Prothonotary's Office, which is located on the first floor of the Dauphin County Courthouse, 101 Market Street, Harrisburg, PA 17101. The Prothonotary's Office is open from 8:00 a.m. to 4:30 p.m. Monday – Friday.
5. The Prothonotary's Office will date stamp your forms. The Prothonotary's Office will keep the original and one (1) copy and give you one (1) copy for your records.
6. See the Prothonotary's Fee Schedule for the amount of the filing fee. The filing fee is payable by cash, certified check or money order made payable to the Dauphin County Prothonotary. If you do not think that you can afford to pay the filing fee, you may file a Petition to Proceed *In Forma Pauperis* (IFP) and Affidavit (see Self Help Center *In Forma Pauperis* forms and instructions for family law cases).
7. The Prothonotary's office will forward the original of all forms to the Court Administrator's Office for assignment to a Custody Conference Officer and the scheduling of all parties for a Custody Conference. Dauphin County has three (3) Custody Conference Officers who meet with all parties to try to work out a custody schedule so that a trial before a judge is not necessary. **The child(ren) should not participate in this conference unless specifically requested by the Conference Officer.**

8. Once the conference is scheduled, all parties will receive a copy of the scheduling order which indicates the date and time of the custody conference. The scheduling order will contain information about viewing the Co-Parenting video that is found on the Dauphin County website. This video must be viewed before the date of the conference. The Court will receive notification that you watched the video, and this will be filed with the Prothonotary. Failure to watch the video will be reported to the Court. The scheduling order will be sent to all parties by regular mail or certified mail, restricted delivery, return receipt requested or the parties will be formally served by the Sheriff. Please note that the other party(ies) will receive a copy of the forms you file **except for the CIF Abuse Victim Addendum**.

9. **CUSTODY CONFERENCES**

- Most of the conferences are held by video but occasionally, conferences are held in-person at the Courthouse.
- **Please be aware that although you may have decided to proceed without an attorney, the other party(ies) may attend the conference with an attorney.**
- At the custody conference, you and the other party(ies) and their attorney, if they have one, will meet with the Custody Conference Officer. The Custody Conference Officer will try to help you reach an agreement about the legal and physical custody of your child(ren).
- Remember to concentrate on what is in the child(ren)'s best interest. Please do not bring up issues that you may have with the other parent as this is the time for both parents to work together to decide what the best custodial arrangement is to enable your child(ren) to grow and mature in a stable, healthy, and happy environment. You want your child(ren) to have the best childhood possible. You must put aside your differences with the other parent and really concentrate on your child(ren).
- This conference is **your** opportunity to be actively involved in establishing a custody schedule. If you cannot come to an agreement, the Custody Conference Officer will send this matter to court which means that you will have a trial before a judge who **will** make the decision **for you** regarding the custody of your child(ren).
- Wear appropriate clothing, be polite, and try to be positive and willing to cooperate in order to work out a custody schedule. Dress as if you were going to work in a business. **DO NOT wear shorts, tank tops or halter tops.**
- Be ready to discuss the case in a mature and flexible manner. **The Custody Conference Officer controls the conference and decides who talks first and whether a statement is relevant to a custody agreement.**
- Try to respect the other party's position and do your best to work out an agreement that reflects not so much your best interest or the interests of the other parent but the **best interest of the child(ren)**.
- You have an obligation to your child(ren) to approach the conference in a reasonable manner. Hurtful talk and abusive language hinder the process. Control your emotions. If there are angry outbursts or inappropriate language, the offending party may be ejected from the conference.

10. **TRIAL BEFORE A JUDGE**

- REMEMBER, if you do not reach an agreement before the Custody Conference Officer, the matter will be scheduled for a **TRIAL** before a **JUDGE**.
- If this happens, **IT IS STRONGLY RECOMMENDED THAT YOU HIRE AN ATTORNEY**. If you do not have an attorney, immediately contact MidPenn Legal Services at (717) 232-0581.
- If you choose to represent yourself, you will be held to the same standard as an attorney. This includes being fully aware of the applicable statutes, rules of civil procedure and rules of evidence.
- You are cautioned that your failure to properly present your case and to present legally sufficient evidence may severely affect your rights in this matter.
- It is not the function of the court, nor is the court permitted to present the case on behalf of a party. It is the sole responsibility of each party to properly and adequately present their case to the court in accordance with the law and the rules of evidence and procedure.
- The court **will not** act as an attorney for either party nor conduct the questioning of any witnesses nor offer any advice or suggestions to either party as to how to proceed.
- Again, if your case proceeds to a trial before a judge, it is **STRONGLY RECOMMENDED** that you hire an **ATTORNEY** to represent you.

**D. INSTRUCTIONS FOR EACH FORM**

For all forms:

**PRINT NEATLY – MAKE SURE THE COURT WILL BE ABLE TO READ WHAT YOU HAVE WRITTEN**

Fill in ALL blank lines. **FOLLOW THESE INSTRUCTIONS VERY CAREFULLY. FAILURE TO DO SO MAY RESULT IN THE ISSUANCE OF AN ORDER REQUIRING YOU TO FILE AN AMENDED COMPLAINT. THIS WILL INCREASE THE TIME THAT IT TAKES FOR YOU TO SEE A CONFERENCE OFFICER.**

**CUSTODY COMPLAINT** – Fill in your name(s) as the Plaintiff(s) and the other party(ies) as the Defendant(s). Include middle initials. Use the same names throughout the forms. Make sure all biological parents are named as parties to this action in the caption and throughout the complaint unless the biological parent is deceased, unknown, or the biological parent’s rights have been terminated by a Court Order.

The Prothonotary’s Office will write in the docket number on the right side of the caption. Fill in the numbered paragraphs as follows:

1. Fill in your full name, complete address, telephone number, email address, and your date of birth. ***If you are a victim of abuse and the other party to this action was the abuser, and you do not want to reveal your contact information, WRITE “SEE CIF ABUSE VICTIM ADDENDUM” and complete the Confidential Information Form Abuse Victim Addendum sheet. An abuse victim is defined as a person for whom a protection order has been granted by a Court. This sheet will be filed in the Prothonotary’s Office and will only be available to the Court and Court staff. You should not send the CIF Abuse Victim Addendum to the opposing counsel and/or the opposing party(ies).***
2. Fill in the name(s), address(es), telephone number, email address, and the date of birth of the other party(ies). You will need the address(es) of the defendant(s). If you do not list the address(es) of the

defendant(s), you will be required to file an amended complaint that contains the address(es). **A CONFERENCE WILL NOT BE SCHEDULED UNTIL YOU HAVE THE ADDRESS(ES) OF THE DEFENDANT(S).**

- 3a. **Check** all that apply: shared legal custody, sole legal custody, partial physical custody, primary physical custody, shared physical custody, sole physical custody, supervised physical custody to indicate what you are seeking.

**You will see that each child is identified by number and listed as CHILD 1, CHILD 2, etc. on the Complaint form. DO NOT WRITE THE CHILD(REN)'S NAMES OR THE COMPLETE DATE OF BIRTH ON THE CUSTODY COMPLAINT. You must complete the Confidential Information Form and include the full name and full date of birth of CHILD 1, CHILD 2, etc.** Complete the address(es) of the child(ren) for whom you are seeking custody and year of birth. If you need more room, use the reverse side of the page or an additional sheet of paper. If the child(ren)'s address is confidential because of abuse, complete the Confidential Information Form Abuse Information Addendum.

- 3b. **Check** were/were not to indicate if the parents were married when the child(ren) was/were born.

Enter the name of the person the child(ren) are presently living with, and that person's address.

List all the places the child(ren) have lived in the last five (5) years (or if they are younger than five (5) years old, since their birth). **Start with the most recent place and go backward. The child(ren)'s current residence should be listed first.** If you do not remember exact dates, try to remember the month and year. Also, give the names of all the people who have lived in each of the households. If you need more room, use the bottom of the page or another sheet of paper. **Remember to list not only the street address but also the city, county and state.** This is very important to determine if this court has jurisdiction over this matter. **IF YOU NEED TO IDENTIFY CHILD(REN) WHO ARE THE SUBJECT OF THIS CUSTODY CASE, USE CHILD 1, CHILD 2, ETC. DO NOT USE THEIR NAMES. IF YOU NEED TO IDENTIFY CHILDREN NOT THE SUBJECT OF THIS CUSTODY CASE, USE THEIR INITIALS. DO NOT USE THE NAME OF ANY PERSON UNDER THE AGE OF 18.**

- 3c. Give the name and address of the child(ren)'s parent. **Check** whether they are single, married, or divorced.

Give the name and address of the child(ren)'s other parent. **Check** whether they are single, married, divorced.

4. You are the Plaintiff. Explain your relationship to the child(ren). List the people you live with and **your** relationship to them. **IF YOU NEED TO IDENTIFY CHILD(REN) WHO ARE THE SUBJECT OF THIS CUSTODY CASE, USE CHILD 1, CHILD 2, ETC. DO NOT USE THEIR NAMES. IF YOU NEED TO IDENTIFY CHILDREN NOT THE SUBJECT OF THIS CUSTODY CASE, USE THEIR INITIALS. DO NOT USE THE NAME OF ANY PERSON UNDER THE AGE OF 18.**
5. The other party is the Defendant. Explain the Defendant's relationship to the child(ren). List the people they live with and their relationship to each other. **IF YOU NEED TO IDENTIFY CHILD(REN) WHO ARE THE SUBJECT OF THIS CUSTODY CASE, USE CHILD 1, CHILD 2, ETC. DO NOT USE THEIR NAMES. IF YOU NEED TO IDENTIFY CHILDREN NOT THE SUBJECT OF THIS CUSTODY CASE, USE THEIR INITIALS. DO NOT USE THE NAME OF ANY PERSON UNDER THE AGE OF 18.**

- 6(a). Have you ever participated:

As a party,

As a witness, or

In any other way,

in any litigation concerning the custody of the child(ren) in any court proceeding (in this court or in any other court)? If you answer **Yes**:

Check has in the first line and explain on the lines below on the form.

If you answer **No**:

Check has not in the first line.

- 6(b).** Do you have any information of a custody proceeding concerning the child(ren) pending in any court anywhere (in Pennsylvania or a court in any other state)? If you answer **Yes**:

Check has in 6(b) and explain on the lines below on the form.

If you answer **No**:

Check has no in 6(b).

- 6(c).** Do you know of any person other than you or the Defendant who has physical custody of the child(ren) or claims to have custody rights with respect to the child(ren)?

If you answer **Yes to either question**:

Check knows in 6(c) and explain on the lines below on the form.

If you answer **No to both questions**:

Check does not know in 6(c).

- 7.** Explain the custody arrangement you are seeking and the reasons. Do not say something you are unable to prove. Also, remember that the other parent will always have some contact with the child(ren), unless you are able to prove that they are truly dangerous to the child(ren). **DO NOT IDENTIFY THE CHILDREN BY NAME IN THIS PARAGRAPH. REFER TO THEM AS CHILD 1, CHILD 2, ETC.**
- 8. Make sure both parents and anyone else who has actual (physical) custody of the child(ren) are named as either Plaintiff or Defendant.**

**COMPLETE PARAGRAPH 9 IF YOU ARE FILING FOR CUSTODY OF YOUR GRANDCHILD(REN), YOUR GREAT-GRANDCHILD(REN), OR STAND *IN LOCO PARENTIS* TO THE CHILD(REN). IF YOU ARE NOT FILING FOR CUSTODY OF YOUR GRANDCHILD(REN) OR GREAT-GRANDCHILD(REN) OR DO NOT STAND *IN LOCO PARENTIS* TO THE CHILD(REN), SKIP PARAGRAPH 9 AND GO TO PARAGRAPH 10.**

- 9.**
- (a)** Complete this section only if you are seeking physical or legal custody and are *in loco parentis* to the child, otherwise, leave this section blank. Set forth facts establishing standing under 23 Pa.C.S. §5324(2).
  - (b)** Complete this section only if you are a grandparent who is not in loco parentis to the child and is seeking physical and/or legal custody, otherwise leave this section blank. Set forth facts establishing standing under 23 Pa.C.S. §5324(3).
  - (c)** Complete this section only if you are seeking physical or legal custody of the child and are not *in loco parentis* to the child, otherwise, leave this section blank. Set forth facts establishing standing under 23 Pa.C.S. §5324(4) and (5).
  - (d)** Complete this section only if you are a grandparent or great-grandparent who is seeking partial physical custody or supervised physical custody of a grandchild or great-grandchild pursuant to 23 Pa.C.S. §5325, otherwise, leave this section blank. Set forth facts establishing standing pursuant to 23 Pa.C.S. §5325.



10. MAKE SURE YOU HAVE FILLED OUT THE CRIMINAL RECORD/ABUSE HISTORY VERIFICATION. SEE PAGE 10 FOR INSTRUCTIONS. This form is found in your packet.
11. MAKE SURE YOU HAVE FILLED OUT THE CONFIDENTIAL INFORMATION FORM AND, IF RELEVANT, THE CONFIDENTIAL INFORMATION FORM ABUSE VICTIM ADDENDUM WITH THIS COMPLAINT.

In the next paragraph, **check all that apply** -- (shared legal custody), (sole legal custody), (sole physical custody), (primary physical custody), (partial physical custody), (shared physical custody), (supervised physical custody).

Sign and print your name. Complete the 'Verification' and 'Certification'.

### **CONFIDENTIAL INFORMATION FORM**

***This form must be filed with the Complaint for Custody.***

- Complete the caption as you did for custody complaint.
- List the date.
- List the full name of the child(ren) and the date of birth of the child(ren). Use one box for each child. Additional pages are provided.
- Sign in the space provided and list the date.
- Print your name, address, telephone number and email address in the space provided **unless your contact information is found on the CIF Abuse Victim Addendum because you are a victim of abuse and the other party is the abuser.**

### **SELF-REPRESENTED PARTY ENTRY OF APPEARANCE**

***This form must be filed with the Prothonotary every time you change your address.***

1. Complete the caption as you did for the scheduling order and custody complaint. Check whether you are the plaintiff or the defendant. Check the box marked 'custody'.
2. There are three options in this section. **MARK ONLY ONE BOX.**
  - If this is a new custody action, mark the first box that this is a new case. Sign and move on to 3.
  - If this is not a new custody action and you have always been self-represented, mark the second box. Sign and move on to 3.
  - If this is not a new case and you had an attorney represent you in your most recent action, mark the first box of question 2 and print the name of your attorney. Write the address that you have used to mail this form to your prior attorney.
  - If this is not a new case and you had an attorney represent you in your most recent action and you now want to be self-represented, you can enter your appearance as a self-represented party and sign your name and your attorney can simultaneously withdraw his/her appearance by signing his/her name. Check the second box found in question two and have your prior attorney sign this form prior to filing.
3. Check the appropriate box.

If you checked that you are the victim of abuse and the other party was the abuser, complete **the CIF Abuse Victim Addendum.**

If you checked that you are not the victim of abuse, complete the address where you would like notices and scheduling orders to be sent.
4. Check the appropriate box.

If you checked that you are the victim of abuse and the other party was the abuser, complete **the CIF Abuse Victim Addendum**.

If you checked that you are not the victim of abuse, list your telephone number and email address.

5. I understand that I must file a new form and confidential information for abuse victim addendum (if applicable) **every** time my address or telephone number changes.
6. Check the appropriate box.

If you provided a copy of the Self-Represented Entry of Appearance form to attorneys or self-represented parties list the name and address.

If you are a victim of abuse, you acknowledge your understanding that the Confidential Information Form Abuse Victim Addendum **should not** be sent to any attorney or self-represented party but that the Self-Represented Entry of Appearance Form should be sent to any attorney or self-represented party.

SIGN AND DATE the form and file this at the same time you file your custody complaint.

### **CRIMINAL RECORD/ABUSE HISTORY VERIFICATION**

- Complete the caption as you did for the custody complaint.
- The petitioner must file a verification regarding any criminal or abuse history of the petitioner or anyone living in the petitioner's household. At the custody conference, the conference officer will perform an initial evaluation to determine whether the existence of a criminal or abuse history of either party or members of their household pose a threat to the child(ren).
- Follow the directions as found on this form.
- **Information regarding criminal charges is available to the public through the UJS portal at <http://ujportal.pacourts.us>.**

# CUSTODY COMPLAINT

## FORMS

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YOU CONSULT AN ATTORNEY***

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\_\_\_\_\_  
(Plaintiff(s) (Your Name(s)))

v.

\_\_\_\_\_  
(Defendant(s) (Name(s) of All Other People  
who have Custody Rights))

: IN THE COURT OF COMMON PLEAS  
: DAUPHIN COUNTY, PENNSYLVANIA  
:  
: NO. \_\_\_\_\_ CV \_\_\_\_\_ CU  
:  
: CIVIL ACTION - LAW  
:  
: CUSTODY

## **COMPLAINT FOR CUSTODY**

***If you are an abuse victim and do not want to reveal your contact information, you are not required to list your address, telephone number and email address but you must complete a Confidential Information Form (CIF) Abuse Victim Addendum and file this form with the Prothonotary at the same time you file the Complaint. An abuse victim is defined as a person for whom a protection order has been granted by a court. Write "See CIF Abuse Victim Addendum" on the paragraph instead of listing this information. When you serve the Defendant, do not include the CIF Abuse Victim Addendum. The information contained on the CIF Abuse Victim Addendum will only be available to the Court.***

1. Plaintiff's full name: \_\_\_\_\_

Plaintiff's complete mailing address:

\_\_\_\_\_  
Street, City, State, Zip Code, and County      If confidential, write "See CIF Abuse Victim Addendum"

Plaintiff's telephone number: \_\_\_\_\_  
If confidential, write "See CIF Abuse Victim Addendum"

Plaintiff's email address: \_\_\_\_\_  
If confidential, write "See CIF Abuse Victim Addendum"

Plaintiff's date of birth: \_\_\_\_\_

Plaintiff's relationship to the minor child(ren) is  parent  other \_\_\_\_\_  
(please specify).

**If there is more than one plaintiff listed in the caption, please complete the following information. If there is only one plaintiff listed in the caption, please skip to question 2.**

Additional Plaintiff's full name: \_\_\_\_\_

Additional Plaintiff's complete mailing address:

\_\_\_\_\_  
Street, City, State, Zip Code, and County      If confidential, write "See CIF Abuse Victim Addendum"

Additional Plaintiff's telephone number: \_\_\_\_\_  
If confidential, write "See CIF Abuse Victim Addendum"

Additional Plaintiff's email address: \_\_\_\_\_  
If confidential, write "See CIF Abuse Victim Addendum"

Additional Plaintiff's date of birth: \_\_\_\_\_

Additional Plaintiff's relationship to the minor child(ren) is  parent  other

\_\_\_\_\_  
(please specify)

2. Defendant's full name: \_\_\_\_\_

Defendant's complete mailing address:

\_\_\_\_\_  
Street, City, State, Zip Code, and County If confidential, write "See CIF Abuse Victim Addendum"

Defendant's telephone number: \_\_\_\_\_  
If confidential, write "See CIF Abuse Victim Addendum"

Defendant's email address: \_\_\_\_\_  
If confidential, write "See CIF Abuse Victim Addendum"

Defendant's date of birth: \_\_\_\_\_

Defendant's relationship to the minor child(ren) is  parent  other \_\_\_\_\_  
(please specify).

**If there is more than one defendant listed in the caption, please complete the following information. If there is only one defendant listed in the caption, please skip to question 3(a).**

Additional Defendant's full name: \_\_\_\_\_

Additional Defendant's complete mailing address:

\_\_\_\_\_  
Street, City, State, Zip Code, and County If confidential, write "See CIF Abuse Victim Addendum"

Additional Defendant's telephone number: \_\_\_\_\_  
If confidential, write "See CIF Abuse Victim Addendum"

Additional Defendant's email address: \_\_\_\_\_  
If confidential, write "See CIF Abuse Victim Addendum"

Additional Defendant's date of birth: \_\_\_\_\_

Additional Defendant's relationship to the minor child(ren) is  parent  other

\_\_\_\_\_  
(please specify)

3(a). Plaintiff seeks (CHECK ALL THAT ARE APPLICABLE)  shared legal custody,  sole legal custody,  partial physical custody,  primary physical custody),  shared physical custody,  sole physical custody,  supervised physical custody of the following child(ren):



**SEE CONFIDENTIAL INFORMATION FORM FOR THE COMPLETE NAME AND DATE OF BIRTH OF THE CHILD(REN). DO NOT WRITE THE CHILD(REN)'S NAME OR COMPLETE DATE OF BIRTH ON THIS COMPLAINT. IF YOU HAVE MORE THAN FIVE CHILDREN WHO ARE THE SUBJECT OF THIS CUSTODY ACTION, PLEASE USE AN ADDITIONAL PAGE AND REFER TO THEM AS CHILD 6, ETC. AND LIST THEIR YEAR OF BIRTH AND ADDRESS OR WRITE SEE CIF ABUSE VICTIM ADDENDUM.**

Address of Child 1 (No name) \_\_\_\_\_  
ADDRESS of Child or write "See CIF Abuse Victim Addendum" YEAR of Birth \_\_\_\_\_

Address of Child 2 (No name) \_\_\_\_\_  
ADDRESS of Child or write "See CIF Abuse Victim Addendum" YEAR of Birth \_\_\_\_\_

Address of Child 3 (No name) \_\_\_\_\_  
ADDRESS of Child or write "See CIF Abuse Victim Addendum" YEAR of Birth \_\_\_\_\_

Address of Child 4 (No name) \_\_\_\_\_  
ADDRESS of Child or write "See CIF Abuse Victim Addendum" YEAR of Birth \_\_\_\_\_

Address of Child 5 (No name) \_\_\_\_\_  
ADDRESS of Child or write "See CIF Abuse Victim Addendum" YEAR of Birth \_\_\_\_\_



**Confidential Information Form and CIF Abuse Victim Addendum (If applicable) must be completed and filed with this complaint.**

3(b). The child(ren) was/were born of parents who  were  were not married. The child(ren) are presently in the custody of \_\_\_\_\_,  
who resides at \_\_\_\_\_.  
Complete Address or write "See CIF Abuse Victim Addendum"

Their relationship to the child(ren) is \_\_\_\_\_.

During the past five years, the child(ren) have resided with the following persons and at the following addresses:

**IF YOU NEED TO IDENTIFY CHILD(REN) WHO ARE THE SUBJECT OF THIS CUSTODY CASE, USE CHILD 1, CHILD 2, ETC. DO NOT USE THEIR NAMES. IF YOU NEED TO IDENTIFY CHILDREN NOT THE SUBJECT OF THIS CUSTODY CASE, USE THEIR INITIALS. DO NOT USE THE NAME OF ANY PERSON UNDER THE AGE OF 18.**

Date Range  
(Starting to End Dates for last 5 years)

List All Addresses  
(Street, City, County, State)

\_\_\_\_\_  
(Date Range) Complete Address or write "See CIF Abuse Victim Addendum"

Names: \_\_\_\_\_  
(List names of adults and initials of minors who resided with the subject child at this address.)

\_\_\_\_\_  
(Date Range) Complete Address or write "See CIF Abuse Victim Addendum"

Names: \_\_\_\_\_  
(List names of adults and initials of minors who resided with the subject child at this address.)

\_\_\_\_\_  
(Date Range) Complete Address or write "See CIF Abuse Victim Addendum"

Names: \_\_\_\_\_  
(List names of adults and initials of minors who resided with the subject child at this address.)

\_\_\_\_\_  
(Date Range) Complete Address or write "See CIF Abuse Victim Addendum"

Names: \_\_\_\_\_  
(List names of adults and initials of minors who resided with the subject child at this address.)

**3(c).** The parent of the child(ren) is \_\_\_\_\_,  
(Name of Parent)  
currently residing at \_\_\_\_\_, PA.  
Complete Address or write "See CIF Abuse Victim Addendum"

This parent is (**CHECK ONE**)  married  divorced  single.

The other parent of the child(ren) is \_\_\_\_\_,  
(Name of Other Parent)  
currently residing at \_\_\_\_\_, PA.  
Complete Address or write "See CIF Abuse Victim Addendum"

This parent is (**CHECK ONE**)  married  divorced  single.

**4.** Plaintiff's(s') relationship to the child(ren) is/are that of \_\_\_\_\_.

The Plaintiff(s) currently reside(s) with the following persons:  
**IF YOU NEED TO IDENTIFY CHILD(REN) WHO ARE THE SUBJECT OF THIS CUSTODY CASE, USE CHILD 1, CHILD 2, ETC. DO NOT USE THEIR NAMES. IF YOU NEED TO IDENTIFY CHILDREN NOT THE SUBJECT OF THIS CUSTODY CASE, USE THEIR INITIALS. DO NOT USE THE NAME OF ANY PERSON UNDER THE AGE OF 18.**

<u>Name</u>	<u>Relationship</u>
_____	_____
_____	_____

\_\_\_\_\_  
\_\_\_\_\_

5. Defendant's(s') relationship to the child(ren) is/are that of \_\_\_\_\_.

The Defendant(s) currently reside(s) with the following persons:

**IF YOU NEED TO IDENTIFY CHILD(REN) WHO ARE THE SUBJECT OF THIS CUSTODY CASE, USE CHILD 1, CHILD 2, ETC. DO NOT USE THEIR NAMES. IF YOU NEED TO IDENTIFY CHILDREN NOT THE SUBJECT OF THIS CUSTODY CASE, USE THEIR INITIALS. DO NOT USE THE NAME OF ANY PERSON UNDER THE AGE OF 18.**

<u>Name</u>	<u>Relationship</u>
_____	_____
_____	_____
_____	_____

6(a). Plaintiff (**CHECK ONE**)  has  has not participated as a party or witness, or in another capacity, in other litigation concerning the custody of the child(ren) in this or another court. The court, term, number, and its relationship to this action is:

\_\_\_\_\_.

6(b). Plaintiff (**CHECK ONE**)  has  has no information of a custody proceeding concerning the child(ren) pending in a court of this Commonwealth or any other state. The court, term, number, and its relationship to this action is:

\_\_\_\_\_.

6(c). Plaintiff (**CHECK ONE**)  knows  does not know of a person not a party to the proceedings who has physical custody of the child(ren) or claims to have custody rights with respect to the child(ren). The name and address of such person is:

\_\_\_\_\_  
\_\_\_\_\_.



7. The child(ren)'s best interest and permanent welfare will be served by granting the relief requested because (set forth facts showing that the granting of the relief requested will be in the child(ren)'s best interest and permanent welfare: **IF YOU NEED TO IDENTIFY CHILD(REN) WHO ARE THE SUBJECT OF THIS CUSTODY CASE, USE CHILD 1, CHILD 2, ETC. DO NOT USE THEIR NAMES. IF YOU NEED TO IDENTIFY CHILDREN NOT THE SUBJECT OF THIS CUSTODY CASE, USE THEIR INITIALS. DO NOT USE THE NAME OF ANY PERSON UNDER THE AGE OF 18.**

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8. Each parent whose parental rights to the child(ren) have not been terminated and the person who has physical custody of the child(ren) have been named as parties to this action. All other persons, named below, who are known to have or claim a right to custody of the child(ren) will be given notice of the pendency of this action and the right to intervene:

Name	Address (Street, City, State)	Basis of Claim
_____	_____ Address _____	_____
_____	_____ Address _____	_____
_____	_____ Address _____	_____

**COMPLETE PARAGRAPH 9 ONLY if you are filing for custody of your grandchild(ren), great-grandchild(ren), or stand *in loco parentis* to the child(ren). If you are not a grandparent, great-grandparent, or stand *in loco parentis* to the child(ren) filing for custody, SKIP TO PARAGRAPH 10.**

9. (a) I am/we are seeking physical or legal custody of the child(ren) and are *in loco parentis* to the child(ren) and the following facts establish standing under 23 Pa.C.S. §5324(2):

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(b) I am/we are grandparent(s) seeking physical or legal custody of my/our grandchild(ren) and are not in *in loco parentis* to the child(ren), the following facts establish standing under 23 Pa.C.S. §5324(3):

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(c) I/we are seeking physical or legal custody of the child(ren) and are not *in loco parentis* to the child(ren) and the following facts establish standing under 23 Pa.C.S. §5324(4) and (5):

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(d) I/we are a grandparent or great-grandparent seeking partial physical custody or supervised physical custody of a grandchild(ren) or great-grandchild(ren) and the following facts establish standing under 23 Pa.C.S. §5325:

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10. I have attached the Criminal Record/Abuse History Verification form required pursuant to Pa.R.C.P. No. 1915.3-2.

**11. I have filed a completed the Confidential Information Form and, if relevant, the Confidential Information Form Abuse Victim Addendum with this Complaint.**

Wherefore, Plaintiff(s) request(s) the court to grant **(CHECK ALL THAT ARE APPLICABLE)**  shared legal custody,  sole legal custody,  partial physical custody,  primary physical custody,  shared physical custody,  sole physical custody,  supervised physical custody of the child(ren) and grant the defendant(s) **(CHECK ALL THAT ARE APPLICABLE)**  shared legal custody,  sole legal custody,  partial physical custody,  primary physical custody,  shared physical custody,  sole physical custody,  supervised physical custody.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Plaintiff

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Plaintiff (If more than one plaintiff)

\_\_\_\_\_  
Print Name

**VERIFICATION**

I, \_\_\_\_\_, verify that the statements made in this Complaint for Custody are true and correct. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Plaintiff

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Plaintiff (if more than one plaintiff)

**CERTIFICATION**

I, \_\_\_\_\_, certify that this custody complaint complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Plaintiff

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Plaintiff (If more than one plaintiff)



**BEFORE YOU FILE THIS CUSTODY COMPLAINT WITH THE PROTHONOTARY, MAKE SURE YOU HAVE COMPLETED THE FOLLOWING FORMS:**

- Confidential Information Form.
- Confidential Information Form Abuse Victim Addendum if you are an abuse victim and do not want to disclose your contact information to anyone but the Court.
- Criminal Record/Abuse History Verification.
- Self-Represented Party Entry of Appearance.

**These forms must be filed with the Prothonotary at the same time as the Custody Complaint.**

\_\_\_\_\_, IN THE COURT OF COMMON PLEAS  
Plaintiff(s) DAUPHIN COUNTY, PENNSYLVANIA

v. CIVIL ACTION – CUSTODY

\_\_\_\_\_, NO. \_\_\_\_\_  
Defendant(s)

**CRIMINAL RECORD / ABUSE HISTORY VERIFICATION**

I, \_\_\_\_\_, hereby swear or affirm, subject to penalties of law including 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities that:

1. Unless indicated by my checking the “YES” box next to a crime below, neither I nor any other member of my household have been convicted or pled guilty or pled no contest or was adjudicated delinquent where the record is publicly available pursuant to the Juvenile Act, 42 Pa.C.S. §6307 to any of the following crimes in Pennsylvania or a substantially equivalent crime in any other jurisdiction, including pending charges:

Answer Yes or No	Crime	Self	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	Sentence
<input type="checkbox"/> <input type="checkbox"/>	18 Pa.C.S. Ch. 25 (relating to criminal homicide)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> <input type="checkbox"/>	18 Pa.C.S. §2701 (relating to simple assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> <input type="checkbox"/>	18 Pa.C.S. §2702 (relating to aggravated assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> <input type="checkbox"/>	18 Pa.C.S. §2705 (relating to recklessly endangering another person)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/> <input type="checkbox"/>	18 Pa.C.S. §2706 (relating to terroristic threats)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Answer Yes or No		Crime	Self	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	Sentence
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §2709.1 (relating to stalking)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §2718 (relating to strangulation)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §2901 (relating to kidnapping)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §2902 (relating to unlawful restraint)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §2903 (relating to false imprisonment)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §2904 (relating to interference with custody of children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §2910 (relating to luring a child into a motor vehicle or structure)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. Ch. 30 (relating to human trafficking)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §3121 (relating to rape)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §3122.1 (relating to statutory sexual assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §3123 (relating to involuntary deviate sexual intercourse)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Answer Yes or No		Crime	Self	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	Sentence
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §3124.1 (relating to sexual assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §3125 (relating to aggravated indecent assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §3126 (relating to indecent assault)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §3127 (relating to indecent exposure)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §3129 (relating to sexual intercourse with animal)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §3130 (relating to conduct relating to sex offenders)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §3301 (relating to arson and related offenses)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §4302 (relating to incest)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §4303 (relating to concealing death of child)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §4304 (relating to endangering welfare of children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §4305 (relating to dealing in infant children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

Answer Yes or No		Crime	Self	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	Sentence
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §5533 (relating to cruelty to animal)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §5534 (relating to aggravated cruelty to animal)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §5543 (relating to animal fighting)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §5544 (relating to possession of animal fighting paraphernalia)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §5902(b) or (b)(1) (relating to prostitution and related offenses)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §5903(c) or (d) (relating to obscene and other sexual materials and performances)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §6301 (relating to corruption of minors)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §6312 (relating to sexual abuse of children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §6318 (relating to unlawful contact with minor)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	18 Pa.C.S. §6320 (relating to sexual exploitation of children)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____



Answer Yes or No		Crime	Self	Other household member	Date of conviction, guilty plea, no contest plea or pending charges	Sentence
<input type="checkbox"/>	<input type="checkbox"/>	23 Pa.C.S. § 6114 (relating to contempt for violation of protection order or agreement)	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Driving under the influence of alcohol or controlled substances	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Driving after imbibing alcohol or utilizing drugs	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	Manufacture, sale, delivery, holding, offering for sale or possession of any controlled substance or other drug or device	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____

2. Unless indicated by my checking the "YES" box next to an item below, neither I nor any other member of my household have a history of violent or abusive conduct, or involvement with a Children & Youth agency including the following:

Answer Yes or No			Self	Other household member	Date
<input type="checkbox"/>	<input type="checkbox"/>	A finding of abuse by a Children & Youth Agency or similar agency in Pennsylvania or similar statute in another jurisdiction	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	Abusive conduct as defined under the Protection from Abuse Act in Pennsylvania or similar statute in another jurisdiction	<input type="checkbox"/>	<input type="checkbox"/>	_____
<input type="checkbox"/>	<input type="checkbox"/>	Involvement with a Children & Youth Agency or similar agency in Pennsylvania or another jurisdiction.	<input type="checkbox"/>	<input type="checkbox"/>	_____

Where: \_\_\_\_\_

**Answer  
Yes or No**

Self

Other  
household  
member

Date

Other: \_\_\_\_\_

\_\_\_\_\_

3. Please list any evaluation, counseling or other treatment received following conviction or finding of abuse:

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4. If any conviction above applies to a household member, not a party, state that person's name, date of birth and relationship to the child.

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5. If you are aware that the other party or members of the other party's household has or have a criminal record/abuse history, please explain:

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I verify that the statements made in the Criminal Record/Abuse History Verification are **true and correct to the best of my knowledge, information and belief**. I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities and **can be punishable by fine or imprisonment.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Printed Name

IN THE COURT OF COMMON PLEAS  
DAUPHIN COUNTY, PENNSYLVANIA

\_\_\_\_\_  
PLAINTIFF

vs.

NO. \_\_\_\_\_

\_\_\_\_\_  
DEFENDANT

**SELF-REPRESENTED PARTY ENTRY OF APPEARANCE**

1. I am the  Plaintiff  Defendant in the above-captioned **(MARK ONE)**  custody,  divorce,  support,  protection from abuse,  paternity case.

This **(MARK ONE)**  is  is **NOT** a new case. I have decided not to hire an attorney to represent me. I am entering my appearance as a self-represented party.

\_\_\_\_\_  
(Signature of Self-Represented Party)

2. **If this is not a new case, please check one box and complete the information. (Skip if this is a new case.)**

- This is **NOT** a new case and (Name of Prior Attorney) \_\_\_\_\_ previously represented me in this case. I have decided not to be represented by that attorney and direct the Prothonotary to remove that attorney as my counsel of record in this case.

I have provided a copy of this form to that attorney listed above at the following address:

\_\_\_\_\_

- This is **NOT** a new case, and my prior attorney acknowledges their withdrawal as my attorney in this case.

\_\_\_\_\_  
(Signature of Prior Attorney)

3. **Check one box.**

I am a victim of abuse and the other party to this action was the abuser. My address, phone number, and email address are listed on the Confidential Information Form Abuse Victim Addendum filed along with this Self-Represented Party Entry of Appearance.

I am not an abuse victim and my address, phone number and email address for the purpose of receiving all future pleadings and other legal notices are listed below. I understand that this address will be the only address to which notices and pleadings in this case will be sent. I understand that I am responsible to regularly check my mail at this address to ensure that I do not miss important deadlines or proceedings.

Complete Mailing Address: \_\_\_\_\_

\_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

4. **I UNDERSTAND I MUST FILE A NEW FORM AND CONFIDENTIAL INFORMATION FORM ABUSE VICTIM ADDENDUM (IF APPLICABLE) EVERY TIME MY ADDRESS OR PHONE NUMBER CHANGES.**

5. **Check one box.**

I have provided a copy of this form to all other attorneys or other self-represented parties at the following addresses as listed below: (Do not list yourself. Use reverse side if you need more space)

Name \_\_\_\_\_ Address \_\_\_\_\_

Name \_\_\_\_\_ Address \_\_\_\_\_

I am a victim of abuse and the other party to this action was the abuser. I understand that I should only provide a copy of this form to all other attorneys or self-represented parties **BUT THAT I SHOULD NOT PROVIDE A COPY OF THE CONFIDENTIAL INFORMATION FORM ABUSE VICTIM ADDENDUM TO ANYONE EXCEPT TO THE COURT BY FILING THAT FORM WITH THE APPROPRIATE FILING OFFICE (PROTHONOTARY OR DOMESTIC RELATIONS).**

6. **I fully understand that by deciding to represent myself, the Court will hold me to the same standards of knowledge regarding the statutory law, evidence law, Local and State Rules of Procedure and applicable case law as a Pennsylvania licensed attorney, and that I must be fully prepared to meet those responsibilities.**

I verify that the statements made in this Entry of Appearance as a Self-Represented Party are true and correct. I understand that if I make false statements herein, that I am subject to the criminal penalties of 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities which could result in a fine and/or prison term.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Self-Represented Party

### **CERTIFICATION**

I, (Your Name) \_\_\_\_\_, certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Self-Represented Party