

**ORANGE COUNTY PARENTING COORDINATION PROGRAM  
REFERRAL CHECKLIST**

**SECTION A:** (To be completed by Attorney/Party)

Case No.: \_\_\_\_\_ Division: \_\_\_\_\_ Date: \_\_\_\_\_

This form was completed by: (Name) \_\_\_\_\_

**Petitioner's Contact Information**

**Respondent's Contact Information**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Phone No.: \_\_\_\_\_

**Petitioner Attorney's Contact Information (if applicable)**

**Respondent Attorney's Contact Information (if applicable)**

Name: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.: \_\_\_\_\_

Phone No.: \_\_\_\_\_

The Motion to appoint a parenting coordinator was submitted by:

- The court's own motion.
- Joint motion of the parties.
- Motion of the \_\_\_\_\_ Petitioner \_\_\_\_\_ Respondent.

The information in Section B is required per Florida Statute §61.125 so that the Order of Referral to Parenting Coordinator can be made.

(Provide a copy of this checklist to the court who will send it to the Administrative Coordinator of the PC Program who will then prepare the Order and select the PC.)

**SECTION B:**

**1. IN REGARDS TO DOMESTIC VIOLENCE:**

- There is no history of domestic violence; or,
- There has been a history of domestic violence, and:
  - Each party has been offered an opportunity to consult with an attorney or domestic violence advocate before this court has accepted the parties' consent; and,
  - Each party has consented to this referral and the consent has been given freely and voluntarily.

**2. IN ADDITION TO ANY SAFETY MEASURES THE PARENTING COORDINATOR DEEMS NECESSARY, THE FOLLOWING DOMESTIC VIOLENCE SAFEGUARDS MUST BE IMPLEMENTED: (Choose all that apply)**

- None are necessary.
- No joint meetings.
- No direct negotiations.
- No direct communications.
- Other: \_\_\_\_\_

**3. FEES AND COSTS FOR PARENTING COORDINATION:**

- a.  The parties have consented to this referral to parenting coordination; or,  
 This order is without the consent of the parties, but the court has determined that the parties have the financial ability to pay the parenting coordination fees and costs.
- b. The court allocates the payment of fees and costs for parenting coordination as follows:
  - \_\_\_\_\_ % shall be paid by the Father.
  - \_\_\_\_\_ % shall be paid by the Mother.
  - Other: \_\_\_\_\_

**APPROVED BY (JUDGE / MAGISTRATE):** \_\_\_\_\_