

STATE OF HAWAII FAMILY COURT FIRST CIRCUIT	<b>ORDER REGARDING SUPERVISED VISITATION</b> <input type="checkbox"/> BY STIPULATION	CASE NUMBER  FC- ____ No. ____
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<div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 10px;"></div> <div style="text-align: right; padding-right: 20px;">Plaintiff/Petitioner,</div> <div style="text-align: center; padding: 10px 0;">v.</div> <div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 10px;"></div> <div style="text-align: right; padding-right: 20px;">Defendant/Respondent.</div>	This document is prepared by: <input type="checkbox"/> Plaintiff/Petitioner <input type="checkbox"/> Attorney for Plaintiff/Petitioner <input type="checkbox"/> Defendant/Respondent <input type="checkbox"/> Attorney for Defendant/ Respondent  <div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> Name <div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> Address <div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> City, State, Zip Code <div style="border-bottom: 1px solid black; height: 20px; margin-bottom: 5px;"></div> Telephone Number
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For good cause and in the best interests of the child(ren), IT IS HEREBY ORDERED, pursuant to Section 571-46(a) of the Hawai'i Revised Statutes (HRS) and/or Rule 54.2 of the Hawai'i Family Court Rules, as follows:

1. That ☐ Plaintiff/Petitioner ☐ Defendant/Respondent \_\_\_\_\_ hereinafter ☐ Father ☐ Mother ☐ \_\_\_\_\_, shall have supervised visitation with the following subject child(ren) stated herein.

<u>Subject Child(ren)'s Name</u>	<u>M/F</u>	<u>Date of Birth</u>	<u>School</u>
(1) _____			
(2) _____			
(3) _____			
(4) _____			

2. That supervised visitation is necessary because (state the reasons for supervised visitation): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**If this case involves alleged sex abuse and/or domestic violence, all relevant orders must be provided to the Visitation Supervisor by the visiting parent or his/her attorney prior to the commencement of the visitation.**

3. That visitations shall be supervised by a Visitation Supervisor ("VS") who is a neutral third person, who is not a party to this action and has no conflict of interest with either parent or child(ren).

4. VISITATION SUPERVISOR: The parties/attorneys have contacted the following person to be the VS and he/she has agreed to be the VS:

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

Telephone: \_\_\_\_\_

E-mail: \_\_\_\_\_

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## 6. Supervised visitation times shall be as follows: (Not more than six (6) hours):

Sunday	From _____ .m.	to _____ .m.
Monday	From _____ .m.	to _____ .m.
Tuesday	From _____ .m.	to _____ .m.
Wednesday	From _____ .m.	to _____ .m.
Thursday	From _____ .m.	to _____ .m.
Friday	From _____ .m.	to _____ .m.
Saturday	From _____ .m.	to _____ .m.

## 7. The pick-up and drop-off shall occur at the following locations: (Should be a consistent location)

Sunday	
Monday	
Tuesday	
Wednesday	
Thursday	
Friday	
Saturday	

## 8. The individuals who are authorized to pick-up and drop-off the child(ren) are: \_\_\_\_\_

## 9. The visitations shall commence on (date) \_\_\_\_\_ and shall end on (date) \_\_\_\_\_ and shall last no longer than four (4) months in duration, unless a written agreement is reached between the parties and the Visitation Supervisor is approved by the Court.

## 10. The visiting parent shall coordinate all of the activities for the visitation, except that where there is an allegation of sex abuse, no visit shall occur at the place of the alleged abuse. There shall be no water sports for any supervised visit.

11. SUPERVISED VISITATION FEES AND COSTS:

The fee for the visitation (as quoted by the VS) shall be: \$\_\_\_\_\_ per hour in addition to travel costs of \$\_\_\_\_\_ per visit or \$\_\_\_\_\_ per mile. This amount will be paid by ☐ Mother (\_\_\_\_%)

☐ Father (\_\_\_\_%) ☐ Split equally, and shall be paid at the beginning of each visit by cash or check. If a check is returned by a party's bank, the parent whose check was returned shall be responsible for all the bank fees incurred by the VS and thereafter shall then pay for his/her visitation fees in cash.

The costs for entrance fee for the VS during the visit (e.g., zoo, museum, etc.) shall be paid by:

☐ Mother (\_\_\_\_%) ☐ Father (\_\_\_\_%) ☐ Split equally.

**BOTH PARENTS SHALL:**

- ▶ Arrive promptly for all visits. The non-visiting parent shall arrive 15 minutes before the scheduled visitation start time and shall release the child(ren) to the visitation supervisor ("VS"). The non-visiting parent shall then leave the location. The visiting parent shall arrive 10 minutes before the scheduled visitation start time and shall wait until the VS indicates that the child(ren) is/are ready to start the visit. At no time shall the visiting parent meet the child(ren) at the non-visiting parent's vehicle.

If the visiting parent is more than 15 minutes late for the start time of the visitation, the VS shall cancel the visitation and contact the non-visiting parent to return to the location and pick-up the child(ren). The VS will then notify the parties' attorneys (if any) the next business day that the visitation did not occur. If the non-visiting parent is late, the VS will call the non-visiting parent. If the child(ren) has/have not arrived within 15 minutes of the scheduled visitation start time and the VS was unable to contact the non-visiting parent, then the visit will be cancelled and the non-visiting parent shall be responsible for 100% of the visitation fees for that visit;

- ▶ Arrive promptly at the end of the visitation. When the visit is over, the VS shall escort the child(ren) to the non-visiting parent and the visiting parent shall leave the location. If the non-visiting parent fails to arrive within 15 minutes of the end time of the visitation, then the VS shall bill the non-visiting parent \$5.00 per minute that the non-visiting parent is late. Payment for the late pick-ups shall be made promptly. The VS may attempt to contact the non-visiting parent by telephone. If there is no response and the 15 minute time period has elapsed and the non-visiting parent has not arrived to pick-up the child(ren), the proper authorities shall be contacted.
- ▶ **Not** question the child(ren) about the other parent, make disparaging comments to the child(ren) about the other parent prior to or during the visit and not use the child(ren) as messengers to the other parent;
- ▶ **Not** ask or use the supervised visitation as a time to exchange gifts, information, documents, etc.;
- ▶ **Not** discuss this case with the VS or ask the VS' opinion on custody and/or visitation matters;
- ▶ **Not** invite other persons, other than those named in this Order, to the pick-ups and drop-offs, or to meet them during the visitation. The visitation shall be for the visiting parent and child;
- ▶ **Not** request the VS to testify, write reports or provide any information regarding the visitations unless a written agreement has been made between the VS and both parties or as ordered by the Court. A separate fee may be charged by the VS for these additional services;
- ▶ Notify the VS more than 24 hours in advance if a visitation is to be cancelled. The VS shall not attempt to reschedule the missed visitation. If a cancellation is made less than 24 hours in advance, the VS shall be paid the visitation fee as if the visitation had occurred;
- ▶ Prior the first visit, provide the VS with the appropriate information specific to the child(ren) (i.e., medication needs, dietary needs, allergies, behavioral issues, mental health issues, etc.);

**THE VISITATION SUPERVISOR ("VS") SHALL:**

- ▶ Provide supervision for the named child(ren) and named parent;
- ▶ Arrive on time for the scheduled visitations;
- ▶ Provide a 48 hour notice if a scheduled visitation needs to be cancelled, unless in the case of an emergency;
- ▶ Attempt to secure an alternate VS if the VS is unavailable and shall provide the contact information of the alternate VS to both parents;
- ▶ Make the determination if the visiting parent will be able to transport the child(ren) in his/her vehicle during the visitation, and if so, ensure that the proper seats are available for the child(ren);
- ▶ **Not** act as a mediator between the parents;
- ▶ **Not** provide transportation for either the child(ren) or the parents;
- ▶ **Not** conduct parenting education for the visiting parent;
- ▶ **Not** discuss this case or the potential outcomes with either parent;
- ▶ **Not** provide snacks or food for the child(ren) or parent;
- ▶ **Not** change diapers or clothes of the child(ren), run after a child, put in or remove a child from a safety seat or carry a child;
- ▶ **Not** be required to pay for entrance fees or other costs associated with the visitation (e.g., admission fees, movie ticket, etc.);
- ▶ Determine if a visitation should end earlier than anticipated and may suspend any future visitations. Should the VS suspend future visitations, he/she shall explain, in detail, the reasons of the suspension to the court in a letter and provide copies to the attorney(s) and to any pro se party.

**OTHER PROVISIONS:**

- ▶ If a visitation falls on a state and/or federal holiday, then it will be up to the VS whether or not the visitation shall occur and what additional fees may be charged due to the holiday hours, and the VS shall notify the parties within one (1) week prior to the holiday.
- ▶ If an emergency arises involving a child, the child is to be taken \_\_\_\_\_ hospital. A copy of the child(ren)'s medical insurance card shall be provided to the visiting parent before the first visit and shall be brought to all visits by the visiting parent.

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12. Other: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

13. A copy of this Order shall be given to the VS by ☐ Mother/her attorney ☐ Father/his attorney within five (5) days of the filing of this Order or one (1) day prior to the first visit, whichever occurs first.

**THE CONTACT INFORMATION FOR THE PARTIES IS:**

	FATHER	MOTHER
Name:		
Address:		
City, State, Zip Code:		
Home Telephone:		
Cell Telephone:		
E-Mail:		
Attorney's Name:		
Attorney's Address:		
City, State, Zip Code:		
Telephone Number:		
Fax Number:		
E-Mail:		

DATED: Kapolei, Hawai'i, \_\_\_\_\_.

\_\_\_\_\_  
 JUDGE OF THE ABOVE -ENTITLED COURT

Print Judge's Name: \_\_\_\_\_

APPROVED AS TO FORM AND CONTENT:

Father	Date	Mother	Date
Attorney for Father	Date	Attorney for Mother	Date



In accordance with the Americans with Disabilities Act, as amended, and other applicable state and federal laws, if you require accommodation for a disability, please contact the ADA Coordinator at the First Circuit Family Court office by telephone at 954-8200, fax 954-8308, or via email at [adarequest@courts.hawaii.gov](mailto:adarequest@courts.hawaii.gov) at least ten (10) days prior to your hearing or appointment date.

*Please call the Family Court Service Center at 954-8290 if you have any questions about forms or procedures.*