

STATE OF HAWAII FAMILY COURT FIRST CIRCUIT	NOTICE TO ATTEND KIDS FIRST	CASE NUMBER FC-D No. _____
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PLAINTIFF Name: _____ Address: _____ _____ Phone: (home) _____ (Staff Use Only) (work) _____ Date Attended: _____ Cellular: _____	ATTORNEY (Name, Address, and Telephone Number) <input type="checkbox"/> Plaintiff Pro Se
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DEFENDANT Name: _____ Address: _____ _____ Phone: (home) _____ (Staff Use Only) (work) _____ Date Attended: _____ Cellular: _____	ATTORNEY (Name, Address, and Telephone Number) <input type="checkbox"/> Defendant Pro Se
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DO NOT BRING CHILDREN UNDER THE AGE OF 6 YEARS OLD

CHILDREN: List all children ages 6 to 17 years old from this and any other relationship:

Name: _____	Birth date and Age: _____	Living With:		
_____	_____	<input type="checkbox"/> Plaintiff	<input type="checkbox"/> Defendant	<input type="checkbox"/> Other
_____	_____	<input type="checkbox"/> Plaintiff	<input type="checkbox"/> Defendant	<input type="checkbox"/> Other
_____	_____	<input type="checkbox"/> Plaintiff	<input type="checkbox"/> Defendant	<input type="checkbox"/> Other
_____	_____	<input type="checkbox"/> Plaintiff	<input type="checkbox"/> Defendant	<input type="checkbox"/> Other

(STAFF USE ONLY) Date Attended _____ _____ _____
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NOTE: Plaintiff and Defendant must attend. Children, ages 6-17, who have lived as a family with this Plaintiff and Defendant must attend.

Choose one location only:

<input type="checkbox"/> KAPOLEI Time: 5:00 p.m. Registration 5:30 p.m. - 7:30 p.m. Program Place: Ronald T.Y. Moon Kapolei Courthouse 4675 Kapolei Parkway Date: Wednesday: _____	<input type="checkbox"/> HONOLULU Time: 5:00 p.m. Registration 5:30 p.m. - 7:30 p.m. Program Place: Circuit Court Ka'ahumanu Hale, 777 Punchbowl Street Date: Wednesday: _____
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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 at least ten (10) days prior to your hearing or appointment date.

Please call the Kids First Program at 954-8280 if you have any questions about how to fill out this form.

DATE:	CLERK'S SIGNATURE	COURT USE ONLY
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KIDS FIRST INSTRUCTIONS

KIDS FIRST is a program designed to help parents understand the effects of separation and divorce on their children and to help children cope with changes in the families. BOTH parents **must attend**. Children (age 6-17) of either Plaintiff or Defendant, from this and any other relationship who have lived with Plaintiff's and Defendant's current family **must attend** Kids First, unless excused by the Judge.

Failure to attend may cause you to be brought before the Court to explain your non-attendance and may be considered as a factor in custody decisions. Non-attendance may also delay the granting of your Divorce Decree.

You and your children will watch a video. Parents will have their own program presented by psychologists who specialize in paternity and divorce. The children and teens will be grouped by age and led by trained facilitators. They will play games, see the courtroom, role play, and may express their feelings about the divorce.

DO NOT BRING CHILDREN UNDER AGE 6 or any child not listed on page 1 of this notice. Babies and minor children are not allowed in the parents' program. If you bring a child under age 6, you will be required to reschedule to another day.

RONALD T.Y. MOON KAPOLEI COURTHOUSE (KAPOLEI)

Metered Parking is available. Meters stop at 4:30 p.m. so meters do not need to be paid after 4:30 p.m. Enter through the front door at 4675 Kapolei Parkway.

CIRCUIT COURT, KA'AHUMANU HALE (HONOLULU)

Street parking is available.

Caution: Halekauwila Street, makai side (ocean side), is a tow-away zone.

Enter through the front door at 777 Punchbowl Street.

You must call (808) 954-8280 if any of the following apply:

- ▶ **Restraining Order**
- ▶ **Moving off island**
- ▶ **Child Protective Service Case**
- ▶ **Child with special needs (speech, vision/hearing/intellectually impaired)**
- ▶ **You received this notice after your scheduled date**
- ▶ **If you need an interpreter**
- ▶ **Any scheduling questions**

Leave your name, daytime telephone/cellular phone number and a detailed message on the recording on (808) 954-8280. Your call will be returned as soon as possible.



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