

**IN THE COURT OF COMMON PLEAS
JUVENILE DIVISION
WAYNE COUNTY, OHIO**

In the Matter of _____ :
_____ :
(Child's Name) _____ : Case No. _____ :
DOB: _____ :

**COMPLAINT FOR ALLOCATION OF PARENTAL
RIGHTS AND RESPONSIBILITIES**

The undersigned complainant parent states as follows:

1. ____ (If checked) No court has issued an order regarding the above-captioned child.
____ (If checked) The following court issued an order regarding the above-captioned child:
_____. **A copy of the current order is attached.**
2. The child now resides at _____, which is located
(Address)
within the _____ in Wayne County, Ohio.
(School District)
3. The child's biological or adoptive parents and legal custodian(s) are as follows:
Parent 1: _____
Parent 2: _____
Legal Custodian(s): _____

4. I request that the Court allocate parental rights and responsibilities for the child. Specifically, I request the following (*check all that apply*):

_____ Name _____ as the residential parent and legal custodian of the child.

_____ Award _____ a parenting time (visitation) order.

_____ Adopt a Shared Parenting Plan. **A copy of a proposed Shared Parenting Plan is attached.**

_____ Establish a child and medical support order.

_____ Other (*explanation required*): _____

5. _____ (if checked) I am filing this Complaint pursuant to the guidance or recommendation of a public children services agency or children services board. My caseworker for that agency is: _____

6. It is in the child's best interest to award the above order(s).

[THE REMAINDER OF THIS PAGE IS INTENTIONALLY BLANK.]

By signing below, I represent the above information is truthful and complete to the best of my knowledge.

Signature of Complainant

Address

City/State

In _____ County, Ohio, the above was sworn to and subscribed in my presence this _____ day of _____, _____.

Notary Public

CERTIFICATE OF SERVICE

By signing below, I hereby certify I have served this complaint on the below named individuals by the methods of service described:

Said service was completed on this date: _____

Signature of Complainant