ONTARIO Court File Number (Name of court) Form 35.1: Affidavit in Support of Claim for Custody or Access, dated Court office address Applicant(s) Full legal name & address for service — street & number, municipality, Lawyer's name & address — street & number, municipality, postal code, postal code, telephone & fax numbers and e-mail address (if any). telephone & fax numbers and e-mail address (if any). Respondent(s) Full legal name & address for service — street & number, municipality, Lawyer's name & address — street & number, municipality, postal code, postal code, telephone & fax numbers and e-mail address (if any). telephone & fax numbers and e-mail address (if any). Affidavit in Support of Claim for Custody or Access (If you need more space, attach extra pages.) My name is (full legal name) My date of birth is (d, m, y)

PART A:

I live in: (name of city, town or municipality and province, state or country if outside of Ontario)

TO BE COMPLETED BY ALL PERSONS SEEKING CUSTODY OR ACCESS

(Write "N/A" if any of the paragraphs do not apply to you or the child(ren).)

- 1. During my life, I have also used or been known by the following names:
- 2. The child(ren) in this case is/are:

I swear/affirm that the following is true:

Child's full legal name	Birthdate (d, m, y)	Age	Full legal name(s) of parent(s)	Name(s) of all people the child lives with now (include address if the child does not live with you)	My relationship to the child (specify if parent, grandparent, family friend, etc.)

	Child's Full Lega		Birthdate (d, m, y)	My re	elationship to cify if parent, s grandparent,	tep-parent,	Nan	ne(s) of the per	son(s) with whom
4.	I am or have be (Including the child Attach a copy of an	(ren) in this (case or any oth	ner child(re	en). Do not inc	lude cases in	volving	ody of or acc a children's aid s	ess to any child: ociety in this section.
	Court location	Names of	f parties in th	ne case	Name(s)	of child(re	n)		rders made ates of orders)
1									

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Full legal name(s) of

parent(s)

Court File Number

Name(s) of all people

the child lives with now

(include address if the child does not live with you)

My relationship

to the child

(specify if parent, grandparent, family friend, etc.)

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Affidavit in Support of Claim for

Birthdate

(d, m, y)

Age

Custody or Access

Form 35.1:

Child's full legal name

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5. I have been a party or person responsible for the care of a child in the following child protection court case(s): (attach a copy of any relevant court order(s) or endorsement(s) you have)

Court location	Names of people involved in the case	Name of children's aid society	Court orders made (include dates of orders)

6. I have been found guilty of the following criminal offence(s) for which I have not received a pardon:

Charge	Approximate date of finding of guilt	Sentence received

7. I am now charged with the following criminal offence(s):

Charge	Date of next court appearance	Terms of release while waiting for trial (attach copy of bail or other release conditions, if any)

- 8. When the court is assessing a person's ability to act as a parent, s. 24 (4) of the *Children's Law Reform Act* requires the court to consider whether the person has at any time committed violence or abuse against:
 - his or her spouse;
 - a parent of the child to whom the claim for custody or access relates;
 - a member of the person's household; or
 - any child.

I am aware of the following violence or abuse the court should consider under s. 24 (4) of the *Children's Law Reform Act*: (describe incident(s) or episode(s) and provide information about the nature of the violence or abuse, who committed the violence and who the victim(s) was/were)

			he child(ren) in this case I	nas/ha	ve lived with the following	
Child's Name		Na (if the child was give the na	Period(s) of Time with Caregiver(s) (d,m,y to d,m,y)			
	the following	address:	Id(ren) is as follows: n) involved in this case) will be			
b) The following po	eopie (otrier	triari trie crilio(rei	i) involved in this case) will be	living v	with me.	
Full legal name and other names this person has used	Birthdate (d, m, y)	Relationship to you	Has a child of this person ever been in the care of a children's aid society? (if yes, give details)	guilt which pard	s this person been found y of a criminal offence (for h he/she has not received a don) or is he/she currently icing criminal charges? (if yes, give details)	
c) Decisions for activities, etc.)			ducation, medical care, reli	gious	upbringing, extra-curricular	
☐ jointly by r	me and (nam	e(s) of person(s))				
☐ by me						
) of person(s))					
(If necessary, provide additional details below.)						

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Form 35.1: Affidavit in Support of Claim for Custody or Access

Form 35	5.1:	Affidavit in Support of Claim for		(page 5)	Court File Number	
		Custody or Acce	ess			
d)		I am a stay-at-ho	me parent.			
	☐ I work: ☐ full time. ☐ part time			e.		
		I attend school:	☐ full time. ☐ p	part time.		
		at: (name of your p	lace of work or school)			
				nd/or school may change ent from what you are doing now	as follows: (complete if you know or v))	
e)	The	child(ren) will at	tend school, daycare o	r be cared for by others or	a regular basis as follows:	
f)		plan for the child ily members, is a		contact with others, includ	ling the child(ren)'s parent(s) and	
g)	Che	eck the appropriate	box:			
		The child(ren) developmental n		ve any special medical,	educational, mental health or	
		support and serv			ng special needs and will receive thave special needs, you do not have to	
		Name of child	Special need(s)	Description of child's needs	Support or service child will be receiving (include the names of any doctors, counsellors, treatment centres, etc. that are or will be providing support or services to the child)	
			medical educational mental health developmental other			
			medical educational mental health developmental other			
			medical educational mental health developmental other			

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	Name of child	Special need(s)	Description of child's needs	Support or service child will be receiving (include the names of any doctors, counsellors, treatment centres, etc. that are or will be providing services to the child)		
		medical educational mental health developmental other				
		medical educational mental health developmental other				
h)	I will have support from	m the following relative	s, friends or community se	rvices in caring for the child(ren):		
cus		in the best interests of		n about my plan in order to make a 5.1 (7)). If, at any time before a fina		
a)	there are any changes	in my life or circumstan	ces that affect the informati s incorrect or incomplete,	on provided in this affidavit; or		
l wi	II immediately serve a	nd file either:				
a)	an updated affidavit in	support of claim for cus	tody or access (Form 35.1)	; or,		
b)			it in Form 14A describing the obringing of the child(ren).	ne correction or change and indicating		
	(Initial	here to show you have rea	ad this paragraph and you und	derstand it.)		
	If you are not the pare of this affidavit.	ent of the child for who	om you are seeking an or	der of custody, you must complete		
You are	a parent of a child if:					
	are the biological parer	nt of the child;				
b) you	are the adoptive parent	t of the child;				
c) a co	ourt has declared that yo	ou are the child's parent	under the Children's Law F	Reform Act; or		
d) you	are presumed to be a f	ather under section 8 of	the Children's Law Reform	Act.		
	re completing Part B, of Part B.	you do not have to sw	ear/affirm the affidavit at	this point. You will swear/affirm a		
Sworn/A	Affirmed before me at					
		munic	cipality			
in	pro	ovince, state, or country				
on	,	•		Signature (This form is to be signed in front of a		

Commissioner for taking affidavits (Type or print name below if signature is illegible.)

Date

(This form is to be signed in front of a lawyer, justice of the peace, notary public

or commissioner for taking affidavits.)

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	Custody or Access

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Details of Case

PART B TO BE COMPLETED ONLY BY A NON-PARENT SEEKING A CUSTODY ORDER

You are not a parent of a child unless:

Child(ren)'s name(s)

- a) you are the biological parent of the child;
- b) you are the adoptive parent of the child;
- c) a court has declared that you are the child's parent under the Children's Law Reform Act; or

Type of Case

d) you are presumed to be a father under section 8 of the Children's Law Reform Act.

NOTICE: If you are a non-parent claiming custody of a child, court staff will conduct a search of the databases maintained by the Ontario courts to identify previous or current family court cases in which you or the child(ren) may have been or may be involved and provide you with a list of those cases. This information will be shared with the court and you must provide a copy to any other party.

If the list contains information about someone other than you, you may swear or affirm an affidavit indicating that you are not the same person as the person named in the list.

In addition to the information in Part A, I swear/affirm that the following is true:

12. To the best of my knowledge, the child(ren) in this case has/have been involved in the following custody/ access or child protection court cases: (do NOT include cases in which the child was charged under the Youth Criminal Justice Act (Canada))

	-,	. , , , , , , , , , , , , , , , , , , ,				
<u> </u>	3. You must file a police records check with the court. Choose the option below that applies to you: I have attached to this affidavit a copy of my police records check, dated (date of report from local police force)					
I have been fou	nd guilty of	f or charged with the follo	t the attached police records check was completed, wing offence(s):			
On (date)		, I sent a	request to (name of local police force)			
			for a police records check.			

I agree to serve and file the police records check with the court within 10 days after the day I receive it. I understand that the court may not make an order for custody of the child(ren) until I have filed the

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police records check.

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14.	Since I	turned 18 years old or became a parei	nt, whichever was earlier, I	have lived in the following places:	
Approximate dates (month/year to month/year)		nate dates (month/year to month/year)	City, town or municipality where you lived (if outside of Ontario, give name of province, state or country)		
15.		provided a signed consent form to the		each of the children's aid societie	
	. who	. whether the society has any records within the meaning of the <i>Children's Law Reform Act</i> regulations relating to me; and			
	the date(s) on which any files were opened and/or closed (if applicable).				
	i) Nar	ne of children's aid society:			
		ne of children's aid society:			
		ne of children's aid society:			
		ne of children's aid society:			
		ne of children's aid society:			
		ne of children's aid society:			
16.	I unde	rstand that if any report from a child is related to me, then, unless the court	ren's aid society indicates	that the children's aid society ha	
	a) the	court;			
		other parties in this case; and			
	c) the child(ren)'s lawyer, if there is one in this case.				
	If I wish to bring a motion asking the court not to release all or part of this report, I understand that I must file m motion with the court no later than 20 days from the day that the last report is received by the court.				
	I also understand that any report indicating that a children's aid society has no records relating to me will not be shared with the court, any other party or the child(ren)'s lawyer.				
		(Initial here to show that you have read this paragraph and you understand it.)			
Swo	rn/Affirn	ned before me at			
		ned before me at	nicipality		
in		province state or country			

Commissioner for taking affidavits

(Type or print name below if signature is illegible.)

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Date

on

Signature (This form is to be signed in front of a lawyer, justice of the peace, notary public or commissioner for taking affidavits.)