

PARENTING COORDINATOR APPLICATION FORM UNIFIED JUDICIAL SYSTEM OF SOUTH DAKOTA

Name: _____

Address: _____

Daytime Phone: _____

Email: _____

Fax Number: _____

INSTRUCTIONS

To be considered for approval as a parenting coordinator, an applicant must complete this application form fully and accurately. This information must be filed with the Presiding Judge for the circuit in which the parenting coordinator will provide parenting coordinator services. You will be notified if any additional information is required and if your application is approved.

REQUIREMENTS

1. Provide your professional background including degree(s). certificate(s). practice specialization(s). years of experience, special training, and any licensures held and dates obtained:

2. Provide a full and complete description of your experience in the following areas:

a. Knowledge of the South Dakota court system and its procedures in contested family matters;

b. Knowledge of South Dakota family law, especially as applied to custody and visitation issues;

c. Knowledge of child development and specifically the impact of divorce or separation on family members:

d. Knowledge of resources available in the state to which the parties and the children can be referred for assistance;

e. Knowledge of interviewing and problem-solving techniques applicable to the family setting.

3. Provide a full and complete disclosure of all professional employment experiences whether related to the role of a parenting coordinator or in any other field:

4. Provide complete information regarding any training, seminars, workshops, etc., you deem pertinent to family law, custody and visitation disputes, interviewing and dispute resolution techniques, child-rearing, child development, domestic violence or abuse or any other areas relevant to the services of a parenting coordinator that you have received:

5. Provide the number of proceedings in which you have been involved as a family court mediator or parenting coordinator giving approximate dates if available:

6. Describe your approach to resolving high-conflict situations and the methods of dispute resolution you have used:

7. Please describe how fees and costs will be calculated for your services as a parenting coordinator:

8. Please describe the requirements for payment of fees:

9. Please indicate if you are willing to accept pro bono cases or cases at a reduced rate. If so, please explain:

I am aware of and agree to abide by the rules for parenting coordinators as promulgated by the Supreme Court of South Dakota.

I understand that being approved and placed on the roster does not guarantee or ensure my appointment to any specific case or cases.

Applicant Signature

Date

Approved:

Presiding Judge

Date

NOTE: This form must be updated as changes to the information occur or at least annually.