

STATE OF VERMONT

SUPERIOR COURT

FAMILY DIVISION

Unit

Case No.

In Re:	DOB
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AFFIDAVIT OF CHILD CUSTODY

(Use One Form Per Child)

1. My name is _____

2. **My relationship to the child named above is:**

- Parent with legal custody before juvenile case began
- Legal guardian
- Custodian
- Other *(describe):* _____

3. **During the last five years the child has lived at the following addresses and with the following household members:** *(Begin with the child's residence just before this Juvenile proceeding started and list all addresses for the past five years. Use an additional page if you need more space.)*

Address Include street, city and state	Dates From when to when	Names of all persons residing in the household with the child

4. **If the current address of any household member listed in the last column is different from the address listed above, please provide a current address for that person:**

5. **Please answer the following questions by checking one of the checkboxes. If you answer 'yes' to any questions, please explain your answer on another page.**

- A. I have participated as a party, witness, or in some other capacity in court proceeding concerning the custody of this child in Vermont or another state: Yes No
- B. I have information about a custody proceeding concerning this child that is currently pending in a Vermont court or a court in another state: Yes No
- C. I have knowledge concerning a person who is not a party to these juvenile proceedings who has physical custody of this child or who claims to have custody or visitation rights with respect to this child. Yes No

I declare that the above statements are true and accurate to the best of my knowledge and belief. I understand that if the above statements are false, I will be subject to the penalty of perjury or to other sanctions in the discretion of the Court.

Date: _____

Signature

Printed Name

Notice: During this proceeding, you must inform the Court if you learn of any other custody proceeding concerning the child.