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) Lawyer's name & address — street & number, municipality, postal code, Full legal name & address for service — street & number, municipality, 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) I live in: (name of city, town or municipality and province, state or country if outside of Ontario) I swear/affirm that the following is true: PART A: 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: My relationship Name(s) of all people to the child Full legal name(s) of Birthdate the child lives with now Child's full legal name Age (specify if parent, (d, m, y)parent(s) (include address if the child grandparent, family does not live with you) friend, etc.)

Form 35.1:	Affidavit in Support of Claim for	(page 2)	Court File Number
	Custody or Access		

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.)

3. I am also the parent of or have acted as a parent (for example, as a step-parent, legal guardian etc.) to the following child(ren): (include the full legal names and birthdates of any child(ren) not already listed in paragraph 2)

Child's Full Legal Name	Birthdate (d, m, y)	My relationship to the child (specify if parent, step-parent, grandparent, etc.)	Name(s) of the person(s) with whom the child lives now (if the child is under 18 years old)

I have been a case(s): (attach	party or person respo a copy of any relevant cou	onsible fo	or the care of a chil or endorsement(s) you	d in the	following child protection
Court location	Names of people inv	olved in	Name of children	n's aid	Court orders made (include dates of orders)
I have been fou	nd guilty of the followi	ng crimin	nal offence(s) for wh	ich I have	e not received a pardon:
Charge		Approximate date of finding of guilt			Sentence received

(page 3)

Name(s) of child(ren)

4. I am or have been a party in the following court case(s) involving custody of or access to any child: (Including the child(ren) in this case or any other child(ren). Do not include cases involving a children's aid society in this section.

Court File Number

Court orders made

(include dates of orders)

Form 35.1:

Court location

Affidavit in Support of Claim for

Attach a copy of any custody or access court order(s) or endorsement(s) you have.)

Names of parties in the case

Custody or Access

	Charge	Date of next court appearance	Terms of release while waiting for trial (attach copy of bail or other release conditions, if any)
			release conditions, il any)
В.	requires the court to consid	g a person's ability to act as a parent, s ler whether the person has at any time o	s. 24 (4) of the <i>Children's Law Reform Ac</i> committed violence or abuse against:
	his or her spouse;	de another aleine for exerted a consequence	
	•	whom the claim for custody or access relate	98;
	a member of the person	's household; or	
	 any child. 		onsider under s. 24 (4) of the <i>Children's</i>
		ncident(s) or episode(s) and provide informatio	n about the nature of the violence or abuse, who
9.		edge, since birth, the child(ren) in this ent, legal guardian, children's aid society etc.)	case has/have lived with the following
9.			Period(s) of Time with Caregiver(s)
9.	caregiver(s): (including a pare	Name(s) of Caregiver(s (if the child was in the care of a children	s aid society, Caregiver(s)
9.	caregiver(s): (including a pare	Name(s) of Caregiver(s (if the child was in the care of a children	Period(s) of Time with Caregiver(s)
9.	caregiver(s): (including a pare	Name(s) of Caregiver(s (if the child was in the care of a children	Period(s) of Time with Caregiver(s)
9.	caregiver(s): (including a pare	Name(s) of Caregiver(s (if the child was in the care of a children	Period(s) of Time with Caregiver(s)

(page 4)

Court File Number

Affidavit in Support of Claim for Custody or Access

Form 35.1:

	n Support o or Access	f Claim for	(page 5)	Court F	ile Number
Child's Name	•	(if the child was	me(s) of Caregiver(s) in the care of a children's aid so me of that children's aid society)		Period(s) of Time with Caregiver(s) (d,m,y to d,m,y)
	the following	address:			
b) The following p	eople (other	than the child(re	n) involved in this case) will b	e living	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 whick pard	s this person been found by of a criminal offence (for the he/she has not received a don) or is he/she currently acing criminal charges? (if yes, give details)
activities, etc.) will be mad	le as follows:			upbringing, extra-curricular
☐ jointly by	me and (nam	ne(s) of person(s))			
☐ by me					
(If necessar	y, provide add	itional details belo	w.)		

orm 35.1:		Affidavit in Supp Custody or Acce		(page 6)	Court File Number
d)		I attend school: at: (name of your pl	Ill time.	part time.	as follows: (complete if you know or
e)	The	child(ren) will att	end school, daycare o	or be cared for by others o	n a regular basis as follows:
f)		plan for the child ily members, is a		contact with others, inclu	ding the child(ren)'s parent(s) and
g)		eck the appropriate The child(ren) developmental n	does not/do not ha	ve any special medical	, educational, mental health or
	Ш	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		

Form 3	5.1: Affidavit in Sup Custody or Acc	port of Claim for ess	(page 7)	Court File Number
	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 fro	om the following relative	es, friends or community se	rvices in caring for the child(ren):
cus ord a) b)	stody or access order der is made in this case there are any change. I discover that the info ill immediately serve a an updated affidavit in if the correction or change any effect it has on me	in the best interests of se, so in my life or circumstant ormation in this affidavit is and file either: In support of claim for custange is minor, an affidavit y plan for the care and upper series.	the child(ren) (subrule 35 to ces that affect the informations incorrect or incomplete, tody or access (Form 35.1); it in Form 14A describing the pbringing of the child(ren).	e correction or change and indicating
		·	ad this paragraph and you under om you are seeking an ord	er of custody, you must complete
You are a) you b) you c) a c d) you If you a	e a parent of a child if: u are the biological pare u are the adoptive parer ourt has declared that y u are presumed to be a	nt of the child; you are the child's parent father under section 8 of	t under the <i>Children's Law F</i> the <i>Children's Law Reform</i> rear/affirm the affidavit at t	
Sworn/A	Affirmed before me at	munici	pality	
in	p	rovince, state, or country		
on	Date	Commissioner	for taking affidavits low if signature is illegible.)	Signature (This form is to be signed in front of a lawyer, justice of the peace, notary public or commissioner for taking affidavits.)

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

(page 8)

Court File Number

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

You are not a parent of a child unless:

- 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
- 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))

Child(ren)'s name(s)	Type of Case	Details of Case

		Custody or Access						
13.	You	u 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 for						
		. Sinc	e the date that the attached police records check was completed,					
		I have been found guilty of or charged						
		On (date)	, I sent a request to (name of local police force)					
			for a police records check.					
14.	Sin	I understand that the court may not may police records check.	ords check with the court within 10 days after the day I receive it. ake an order for custody of the child(ren) until I have filed the arent, whichever was earlier, I have lived in the following places:					
A	ppre	oximate 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.		ave provided a signed consent form to ed below to send a report to me and to	the court, which authorizes each of the children's aid societies the court indicating:					
		whether the society has any records v relating to me; and	vithin the meaning of the Children's Law Reform Act regulations					
		the date(s) on which any files were ope	ened and/or closed (if applicable).					
	• • • • • • • • • • • • • • • • • • • •	Name of children's aid society:						
	i)	That is of children's aid society.						
	ı) ii)							
	,	Name of children's aid society:						
	ii) iii)	Name of children's aid society: Name of children's aid society:						
	ii) iii)	Name of children's aid society: Name of children's aid society: Name of children's aid society:						

(page 9)

Court File Number

Form 35.1: Affidavit in Support of Claim for

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

(page 10)

Court File Number

- **16.** I understand that if any report from a children's aid society indicates that the children's aid society has records related to me, then, unless the court orders otherwise, that report will be shared with:
 - a) the court;
 - b) any 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 my 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.)

Sworn/Affirmed before me at		
	municipality	
in		
province, state, or country		
on		Signature (This form is to be signed in front of a
Date	Commissioner for taking affidavits (Type or print name below if signature is illegible.)	lawyer, justice of the peace, notary public or commissioner for taking affidavits.)