

If you need an additional parenting time chart, fill in the following:

## Parenting Time Schedule

Use the schedule below to show which parent has the child (or children) during each hour block shown. Overnight begins at 9:00 PM and ends at 8:00 AM the next day.

Fill in the parents' names or initials in the chart below to show which parent has the child (or children) each day at each time listed. Enter the parents' names and initials on the lines below:

Parent Name:
Parent Name:
$\qquad$ Initials:
Initials:

Week 3 Schedule:
Enter the parents' names or initials in each box to show who will have the child at each time and day. Do not leave any boxes blank. If the child is scheduled to be somewhere else, for example, school or after school activities, you still must enter the name or initials of the parent responsible for the child at that time.

| Start time | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| 8 AM |  |  |  |  |  |  |  |
| 9 AM |  |  |  |  |  |  |  |
| 10 AM |  |  |  |  |  |  |  |
| 11 AM |  |  |  |  |  |  |  |
| Noon |  |  |  |  |  |  |  |
| 1 PM |  |  |  |  |  |  |  |
| 2 PM |  |  |  |  |  |  |  |
| 3 PM |  |  |  |  |  |  |  |
| 4 PM |  |  |  |  |  |  |  |
| 5 PM |  |  |  |  |  |  |  |
| 6 PM |  |  |  |  |  |  |  |
| 7 PM |  |  |  |  |  |  |  |
| 8 PM |  |  |  |  |  |  |  |
| 9 PM <br> Overnight |  |  |  |  |  |  |  |

Petitioner's initials:
Respondent's initials: $\qquad$
$\qquad$
Week 4 Schedule:

| Start time | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday |
| :--- | :--- | :--- | :--- | :--- | :--- | :--- | :--- |
| 8 AM |  |  |  |  |  |  |  |
| 9 AM |  |  |  |  |  |  |  |
| 10 AM |  |  |  |  |  |  |  |
| 11 AM |  |  |  |  |  |  |  |
| Noon |  |  |  |  |  |  |  |
| 1 PM |  |  |  |  |  |  |  |
| 2 PM |  |  |  |  |  |  |  |
| 3 PM |  |  |  |  |  |  |  |
| 4 PM |  |  |  |  |  |  |  |
| 5 PM |  |  |  |  |  |  |  |
| 6 PM |  |  |  |  |  |  |  |
| 7 PM |  |  |  |  |  |  |  |
| 8 PM |  |  |  |  |  |  |  |
| 9 PM - <br> Overnight |  |  |  |  |  |  |  |

Enter additional parenting time for one or both parties. Provide enough detail so that it is clear (1) who gets the parenting time and (2) when the parenting time will begin and when it will end.

Petitioner's initials:
Respondent's initials:

