

Name: _____

Address: _____

Telephone No.: _____

CUSTODY EVALUATOR

IN THE FAMILY COURT OF THE FIRST CIRCUIT

STATE OF HAWAI'I

)	FC-____ No. _____
)	
_____ ,)	CUSTODY EVALUATOR'S
Plaintiff/Petitioner)	ACKNOWLEDGMENT OF
)	APPOINTMENT AND
vs.)	CERTIFICATION OF
)	MINIMUM REQUIREMENTS
)	
_____ ,)	
Defendant/Respondent.)	
_____)	

CUSTODY EVALUATOR'S ACKNOWLEDGMENT OF APPOINTMENT AND CERTIFICATION OF MINIMUM REQUIREMENTS

I, _____, a licensed _____ in the State of Hawai'i, acknowledge receipt of the Custody Evaluation Appointment Order, filed on _____.

A. I accept the appointment and acknowledge that I will be able to meet the deadlines and fulfill the responsibilities in that Order.

B. Check one:

_____ I certify that I have no conflict of interest in this case (including, but not limited to, current or previous therapeutic, economic, or close personal relationship with any party, child, stepparent, other relative, counsel, or anyone else involved in this case).

INSTRUCTIONS: This form should be **typewritten**. Within **10 days** of receiving the Custody Evaluation Appointment Order, please complete this form and send or deliver it to the court clerk noted in the Order at Family Court, P. O. Box 3498, Honolulu, HI, 96811-3498. Send an un-filed copy to each attorney and pro se party.

_____ There is a conflict or possible conflict of interest as follows: _____

And, I have informed the parties of this and they have waived this conflict in writing, which is attached.

C. I certify that I meet the following minimum requirements:

1. Currently licensed by the State of Hawai'i as a social worker, marriage and family counselor, psychologist, psychiatrist, or attorney.
2. One year experience as a custody evaluator or at least 4 different custody reports filed in any divorce or paternity case in any jurisdiction in the United States within the past 3 years.
3. Either formal education or the equivalent work experience in:
 - a. child development;
 - b. family dynamics in the context of divorce, separation and paternity; including healthy parenting after separation;
 - c. interviewing techniques with children and adults;
 - d. avoiding conflicts of interest, maintaining neutrality and objectivity;
 - e. gathering and evaluating information from collateral sources and assessing credible and relevant data.
4. Working knowledge of and/or ability to recognize:
 - a. physical, mental, and emotional disabilities;
 - b. legal issues and applicable statutes, case law, and rules in divorce, separation, and paternity and the related areas of domestic violence, child abuse, and mandatory reporting requirements;
 - c. psychological and emotional issues in divorce, separation, and paternity including—grief, loss, trauma and other theories regarding crisis and transition for children and families;
 - d. safety issues relevant to divorce, separation, paternity and particular safety issues during the investigation/evaluation process;
 - e. assessment of parenting abilities and construction of effective parenting plans;

- f. clear report writing, including recommendations supported by the report and referrals to appropriate available community resources;
 - g. the need for when specialized knowledge regarding domestic violence (including safety plans), sexual abuse, child abuse/neglect, substance abuse, and/or physical or mental illness is required; and, if I do not possess this specialized knowledge, I know how to obtain the necessary assistance in the investigation;
 - h. effects of culture, religion, and different family dynamics (including extended and/or blended families) on children and parenting;
 - i. the trial process and testifying in court;
 - j. resources to assist parents to reach appropriate agreements.
5. *(After 2008)* I have met the annual continuing specialized training requirements.
6. There are no outstanding complaints filed/lodged against me with my licensing authority and no pending criminal charges.

Dated: Honolulu, Hawai'i _____.

Custody Evaluator's Signature