STATE OF SOUTH DAKOTA IN CIRCUIT COURT

COUNTY OF_____ _____JUDICIAL CIRCUIT

_____ Plaintiff v. _____ Defendant	FILE NO.: _____ **OBJECTION TO THE IMPLEMENTATION OF THE SOUTH DAKOTA PARENTING TIME GUIDELINES**

I _____, pursuant to SDCL 25-4A-16.1, object to the request for the Court to enter an Order implementing the South Dakota Parenting Time Guidelines.

I am answering the Petition implementing South Dakota Parenting Time Guidelines that:

1. I **AGREE** with the following sections of the South Dakota Parenting Time Guidelines:
   _____
   _____
   _____

2. I **DISAGREE** with the following section of the South Dakota Parenting Time Guidelines:_____
   _____
   _____
   _____

3. I either ***PARTIALLY*** **Agree or Disagree** with the following paragraphs of the South Dakota Parenting Time Guidelines:_____
   _____
   _____
   _____

4. I understand that I must comply with the parenting course requirements in SDCL 25-4A-32 in order for this objection to be heard. I have filed, or I will be filing an Affidavit on Court-Approved Parenting Course to comply.

*If you wish to explain your answers to the previous statements, please use the space below. If you do not wish to explain your answers further, omit this page when you submit your **Objection** to the Clerk of Courts.*

1. _____

2. _____

3. _____

I declare under penalty of perjury under the law of South Dakota that the foregoing is true and correct.

Signed on the _____ (Date) day of _____ (Month), _____ (Year) at _____ (City or other location, and State)

By: ☐ Plaintiff ☐ Defendant

_____
Signature

_____
Printed Name

_____
Street Address

_____
City, State, Zip

_____
Telephone Number

STATEMENT OF MAILING

I_____, swear and affirm, under penalty of law, that I mailed my objection to_____by U.S. Mail to the following address:

_____
Name

_____
Street Address

_____
City, State, and Zip Code

I declare under penalty of perjury under the law of South Dakota that the foregoing is true and correct.

Signed on the _____day of_____,_____ at _____
(Date) (Month) (Year) (City or other location, and State)

By: ☐ Plaintiff ☐ Defendant

_____
Signature

_____
Printed Name

_____
Street Address

_____
City, State, Zip

_____
Telephone Number