

IN THE SUPERIOR COURT FOR THE STATE OF ALASKA  
AT \_\_\_\_\_

\_\_\_\_\_  
Parent A (Plaintiff)

\_\_\_\_\_  
Parent B (Defendant) Case No: \_\_\_\_\_

**REQUEST FOR COURT'S CO-PARENTING PROGRAM**

1. I want to participate in the court's Co-Parenting Program.
2. ☐ My co-parent does not want to do the program.  
☐ My co-parent already did the program.  
☐ I don't know what my co-parent wants.
3. I agree that:
  - a. I will complete:
    - i. the 6-hour online *Parenting Without Conflict* program,
    - ii. the 3 free coaching sessions provided by the Parenting Plan Resolution Office, and
    - iii. 3 program surveys.
  - b. I will attend all of my scheduled coaching sessions.
  - c. My lawyer (if I have one) will not attend the coaching sessions.
  - d. I will **not** call the coach to testify to provide any opinion about my participation in the program.
4. I understand that the coaches will only report to the court whether or not I completed the coaching sessions. I understand that the judge may ask me about what I learned.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Print or Type Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
Email: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_

Certificate of Service

☐ I am filing this document through the court's TrueFiling program and will fill out the Certificate of Service through that program.

☐ I certify on \_\_\_\_\_ at \_\_\_\_\_ [date/time] I gave a copy of this document

By: ☐ email ☐ hand-delivery ☐ mail

To: ☐ Parent A/Lawyer ☐ Parent B/Lawyer ☐ Other: \_\_\_\_\_

Signature: \_\_\_\_\_