

Divorce Worksheet

WHO MAKES THE PARENTING DECISIONS?

	You	Other Parent	Together
Babysitting and Childcare	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bedtime/Lights Out	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cell Phone (Use, Restrictions)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Children Allowances and Spending	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Children's Clothing (Shopping, Style, Standards)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Children's Friends (Playdates)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Computer Use (Time Restrictions, Parental Controls, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Curfews	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Dating & Social Events	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Discipline (Handling of Behavior Issues)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Doctor & Dental (Visits and Treatment Plans)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Driving (Driver's Education, Driving Restrictions)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Extracurricular Activities (Music, Sports, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grooming (Bathing, Haircuts, Shaving, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Interaction with School & Teachers	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Meals (Diet, Snacking)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Medications (Prescription and Non-Prescription)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Mobile Devices (iPads, iPods, Smart Phones, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overnights & Weekend Getaways	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Religion (Attendance, Education and Training)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Television (Time Restrictions, Parental Controls, etc.)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Therapy & Counseling	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Toys and Electronics	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Transportation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>