Manitoba

Child Support Service

CHILD SUPPORT ELIGIBILITY FOR CHILDREN UNDER 18 YEARS OF AGE
(USE FORM C FOR ADULT CHILDREN)

A separate Form B must be completed for each child

Name of Applicant_____

This form is mandatory and must be attached to the Application (Form A). Please complete the information for the child as indicated and check ☑ the boxes that apply for the child.

Name _____ Date of Birth _____

            (First/Middle/Last)   (mm/dd/yyyy)

Section A   (Current parenting arrangements for the child)

1.0   Is there an existing court order or written agreement as to parenting arrangements for the child or children: ☐ Yes   ☐   No

1.1   If the answer is yes, please attach copies of all court orders and/or agreements as to the parenting arrangements between the parents

    ☐ Attached   ☐ Not attached (Please provide explanation): _____

1.2   If the answer to question 1.0 is no as to a parenting arrangement through a court order or written agreement, please describe the current parenting arrangement:

    ☐   I have the majority of the physical care and control of the child with the Respondent not exercising any regular periods of physical care and control.

☐ I have the majority of the physical care and control of the child with the Respondent having regular periods of physical care and control that total less than 40% of the time.

☐ The other parent and I share the physical care and control of the child so that we each have no less than 40% of the time to the child based on a regular schedule of physical care and control in a four week cycle. Please complete this chart by filling in the box for each day (includes an overnight) that the child is residing with you.

PARENTING ARRANGEMENT

		MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY	Total Hrs/Week
WEEK 1	O M A E		O M A E		O M A E		O M A E		O M A E		O M A E		O M A E		
WEEK 2	O M A E		O M A E		O M A E		O M A E		O M A E		O M A E		O M A E		
WEEK 3	O M A E		O M A E		O M A E		O M A E		O M A E		O M A E		O M A E		
WEEK 4	O M A E		O M A E		O M A E		O M A E		O M A E		O M A E		O M A E		

Fill in the number of hours you have the child for each section of the day as follows:

O = 12:00 midnight to 6:00 am   Maximum hours = **6** or **24** if you have the child for the entire day
M = 6:00 am to 12:00 noon   Maximum hours = **6**
A = 12:00 noon to 6:00 pm   Maximum hours = **6**
E = 6:00 pm to 12:00 midnight   Maximum hours = **6**

Example: You have the child from 9:00 pm
Friday evening to 6:00 pm Sunday Evening

	FRIDAY	SATURDAY		SUNDAY
O		O	24	O	6
M		M		M	6
A		A		A	6
E	3	E		E	

Fill in only those days that you have all or a part of the day with the child by entering the number of hours beside the applicable section(s) of the day that you have with the child.

<u>Section B (Support Claim for the child)</u>

Please complete the information for the child by checking ☑ all the applicable boxes that apply.

1.   ☐   I am attaching a copy of the registration of birth for the child (where you have a birth certificate for the child)

2.   ☐   I am entitled to claim support for this child or I am the child's parent.

3.   ☐   I request the Child Support Service find that the other parent (the Respondent) has an obligation to support this child as they are a parent of the child.

4.   I am requesting child support for this child as follows:

    4.1   ☐   The child support guidelines table amount because the child lives the majority of time (more than 60%) with me; or

    4.2   ☐   The applicable support amount for a shared parenting arrangement under the child support guidelines based on the net difference formula of the table amount payable by each parent to the other parent for a child because the other parent and I have a shared parenting arrangement for this child;

    4.3   ☐   The child support guidelines table amount requested above in 4.1 or 4.2 above <u>plus</u> the additional special or extraordinary expenses that I am claiming in Form D for the child.

This document forms part of the Application (Form A) for child support