SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE

СН	ILD CUSTODY EVALUATOR (Name and Address)	FOR COURT USE ONLY	
Tal	ephone No.: Fax No.:		
	ephone No.: Fax No.: nail Address:		
SL	IPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE		
Address: City and Zip Code:			
	inch:		
	ANNUAL DECLARATION OF		
	CHILD CUSTODY EVALUATOR QUALIFICATIONS UNDER PENALTY OF PERJURY		
	ONDERT ENACT OF LEGGET		
I,	, å^Ásyad-^ Ásee Á∤ [ູ •	κ	
(Name of Child Custody Evaluator)			
4	I am a duly licensed (check the appropriate box)		
١.		L al knowledge of all matters • ææ^åÆj Á	
	this declaration. If called to testify, I can and will competently and affirmatively		
2.	I have performed at least five child custody evaluations within the last three year	irs.	
3.	and the state of t		
	Court, rule 5.230, and Su] erior Court for the Co nty of Riverside ("the court")		
4	compliance with all training required for child custody evaluators pursuant to the foregoing legislation and rules.		
4.	I am covered by professional liability in surance for acts, errors and omissions made in the performance of my services as a Private Child Custody Evæluator. I further understand it is A y lesponsibility to main aid		
	insurance for as long as I remain on the referral list of Private Child Custody Ev	valuators ("referral list") maintained	
	by the court. I will immediately advise the Mediation Services Manager ("MSM" said policy and/or of any lapse or gap in coverage for as long as I remain on the		
5			
5.	I will notify the MSM within five (5) court business days of my license being revoked or suspended. In the event I am arrested or have criminal charges brought against me, I will notify the Mediation Services Manager within 5		
	court days of the arrest or charge.	G	
6.	. I understand I am required to file Judicial Council form FL-326 (Declaration of Child Custody Evaluator Regarding		
	Qualifications), within 10 days of each appointment by the court to provide se Evaluator.	ervices as a Private Child Custody	
7	I will submit all evaluation reports in the format indicated by the court.		
	I will file said reports with the court and furnish them to the parties or their attorney(s) of record no later than 10		
Ο.	days prior to any relevant hearing or proceeding.	orney(s) or record no later than 10	
9.	I agree to file a new and updated Declaration with the court each calendar year by January 15 th affirming each of		
the facts, agreements, and understandings made herein in order to remain on the referral list.			
10. I understand and agree that the court may remove me from the referral list at any time upon written notification to			
the address identified on the referral list. Reasons for removal may include, but are not limited to, the following:			
(a) Failure to remain current on training mandated by California Rules of Court, Riverside County Superior			
	Court Local Rules and Family CodeL (b) Submission of work that that aoes not meet the sta} dards of practice for a plivate court evaluator per		
	California Rules of Court, Rule 5.230; Failure to submit work in a timely		
	(c) Consistent refusal to accept court cases.		
I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct:			
Name of Evaluator:			
Signature of Evaluator:			

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