## SUPERIOR COURT OF CALIFORNIA • COUNTY OF FRESNO

## Family Dependency Treatment Court Acknowledgements and Agreements Other Parent Participating

Minor's Name:	
Parent:	
1. 2.	I have discussed Family Dependency Treatment Court (FDTC) with my attorney. I understand that another parent who is a party in the case is eligible to participate or is participating in FDTC.
3.	I have discussed the other parent's participation in FDTC with my attorney.
4.	I understand that during FDTC staffing meetings and FDTC review hearings, the judge may receive information about the child or children, and will receive information about me, and my participation and progress in court-ordered treatment programs.
5.	I understand that during the other parent's FDTC review hearings, the judge may deliver to that parent encouragement and incentive items to assist and motivate that parent in completing his or her case plan.
6.	I understand that at the other parent's FDTC staffing meetings and FDTC review hearings there may be some limited discussion of me, and my participation and progress in any court-ordered treatment program.
7.	I understand that no court orders will be made or changed at the other parent's FDTC staffing meetings or FDTC review hearings.
8.	I understand that the FDTC judge will not discuss what occurs at FDTC staffing meetings and FDTC review hearings with any judge handling a non-FDTC legal hearing in the case.
	I understand and agree that FDTC staffing meetings and FDTC review hearings for the other parent will not be recorded by a court reporter and no transcripts of these meetings and hearings will be prepared.
10.	I agree that I do not need to be personally notified of the other parent's FDTC staffing meetings and FDTC review hearings.
11.	I understand that my attorney may attend the other parent's FDTC staffing meetings and FDTC review hearings.
12.	I agree not to be personally present at the other parent's FDTC review hearings.
13.	I understand that other FDTC participants who are not parties to the case may be present during FDTC reviews.
14.	I understand that I can revoke these agreements at any time.
	er consulting with my attorney about Family Dependency Treatment Court, I am making the over acknowledgements and agreements freely and voluntarily.
DA	TED: By:
	(SIGNATURE OF PARENT)
	(PRINT NAME)
	Declaration of Parent's Attorney
	I, spoke with my client regarding
ар	I,, spoke with my client regarding knowledgements and Agreements. I thoroughly reviewed them with my client. My client beared to understand them and agreed to all of their terms. I am signing this form on her/his half until the client can sign it personally.
tru	I declare under penalty of perjury, under the laws of California, that the foregoing is e and correct.
DA	TED: By:
	TED: By: (SIGNATURE OF ATTORNEY)