

### VISITATION PLAN

For each child, state type, time, level of supervision, frequency, duration, location of visits, and transportation arrangements. Revise as often as necessary. If children are separated, also include a plan for sibling visitation. Different forms should be completed when the children have different visitation plans.

<b>Child(ren) Name(s):</b>	

**This plan with \_\_\_\_\_ is effective \_\_\_\_\_ through \_\_\_\_\_.**

<b>Supervision:</b>	<b>By Whom:</b>
Yes      No	
<b>Place of visit:</b>	
<b>Frequency of visits:</b>	
<b>Hours:</b>	
<b>Length of visits:</b>	
<b>Transportation Arrangements:</b>	
<b>Special Considerations:</b>	

Signatures: Child/Youth ( if appropriate) \_\_\_\_\_ Date \_\_\_\_\_ Parent(s) \_\_\_\_\_ Date \_\_\_\_\_  
 Social Worker \_\_\_\_\_ Date \_\_\_\_\_ Others \_\_\_\_\_ Date \_\_\_\_\_