

THE STATE OF NEW HAMPSHIRE
JUDICIAL BRANCH
<http://www.courts.state.nh.us>

Court Name: _____

Case Name: _____

Case Number: _____
(if known)

MOTION TO WAIVE ATTENDANCE AT THE CHILD IMPACT PROGRAM

Pursuant to RSA 458-D:8

RSA 458-D:8 provides that the court may waive the CIP requirement if the court finds good cause on any basis it deems appropriate, including, but not limited to, domestic violence, transportation or child care. The court may also grant time extensions. I, _____ hereby request waiver of CIP attendance. There is good cause to waive my attendance at the Child Impact Program due to the following circumstances:

Date

Signature

I certify that on this date I provided a copy of this document to _____ (other party) or to _____ (other party's attorney) by: ☐ Hand-delivery OR ☐ US Mail OR ☐ E-mail (E-mail only by prior agreement of the parties based on Circuit Court Administrative Order).

Date

Signature

ORDER

- ☐ Motion is GRANTED. The court finds good cause to waive CIP pursuant to RSA 458-D:8.
- ☐ Motion is DENIED. The court does not find good cause to waive CIP pursuant to RSA 458-D:8.
- ☐ Time for completion of seminar is extended to ninety (90) days from the date of this order.

Recommended:

Date

Signature of Marital Master

Printed Name of Marital Master

So Ordered:

I hereby certify that I have read the recommendation(s) and agree that, to the extent the marital master/judicial referee/hearing officer has made factual findings, she/he has applied the correct legal standard to the facts determined by the marital master/judicial referee/hearing officer.

Date

Signature of Judge

Printed Name of Judge