

IN THE INTEREST OF

Name

Request for Case Closure Order

Case No. _____

Date of Birth

I STATE ON INFORMATION AND BELIEF:

1. A dispositional order was made in the above-captioned case.
2. The child/juvenile is/will be placed in the home of a parent.
3. This proposal for case closure has been made by the court; OR
 This request for case closure is being brought by the
 - child/juvenile.
 - child's/juvenile's counsel.
 - guardian ad litem.
 - parent.
 - guardian/custodian.
 - prosecutor.
 - agency responsible for implementing the dispositional order.
4. There is a pending or existing family court action involving the child/juvenile. I request the family court order in [Case Number] _____ in [County] _____ be entered or modified with respect to the following: (Select all that apply)
 - Paternity
 - Legal custody
 - Periods of physical placement
 - Visitation
 - Child support
 - Health care expenses

Specify, in detail, the order being requested: _____

See attached

I request a hearing be held on the matter.

DISTRIBUTION:

1. Court
2. Child/Juvenile
3. Child/Juvenile's Guardian ad Litem/Adversary Counsel
4. Parents
5. Parents' Attorney(s)
6. Child's Guardian/Legal Custodian
7. District Attorney/Corporation Counsel
8. Caseworker
9. Court Appointed Special Advocate (CASA)
10. Tribe
11. Indian Custodian

▶ _____
Requestor

Name Printed or Typed

Address

Email Address Telephone Number

Date State Bar No. (if any)