

STATE OF WISCONSIN, CIRCUIT COURT, \_\_\_\_\_ COUNTY

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**

- ☐ 5. A party's address has changed.  
A Notice of change of Address (JD-1830) has been or will be filed separately.

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)