

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address): TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	<i>FOR COURT USE ONLY</i>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SAN DIEGO <input type="checkbox"/> CENTRAL DIVISION, CENTRAL COURTHOUSE, 1100 UNION ST., SAN DIEGO, CA 92101 <input type="checkbox"/> CENTRAL DIVISION, MADGE BRADLEY, 1409 4TH AVE., SAN DIEGO, CA 92101	
GUARDIANSHIP OF: _____	
PETITION FOR ORDER RE GUARDIANSHIP VISITATION	CASE NUMBER _____

Petitioner(s) _____ requests the court to issue an order to:

- Modify order appointing guardian to include or modify visitation.
- Enforce existing visitation order.
- Attend Family Court Services Child Custody Recommending Counseling.

1. Petitioner is:

- Guardian
- Parent
- Minor (12 or older)
- Stepparent
- Grandparent
- Other: _____

2. Names and addresses of interested persons:

Guardian(s): _____
 Father: _____
 Mother: _____
 Other: _____

3. Minor's date of birth: _____

4. Minor's address: _____

Minor currently resides with: _____

Information requested in items 3 and 4 for additional minors is continued on attachment 3/4.

- 5. Petitioner requests the court to modify the Order Appointing Guardian to order visitation or modify a previous visitation order. **(Must also complete item 6 on page 2)**
- Petitioner requests the court to enforce its previous order for visitation.
- Petitioner alleges the matter of visitation is contested and requests the court to order Family Court Services Child Custody Recommending Counseling.

GUARDIANSHIP OF:	CASE NUMBER
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Explain need or change in circumstances that support the request: _____

continued on attachment 5.

6. Petitioner specifically requests the court to order or modify visitation as follows:

Person to have visitation with minor: _____
(Name and Relationship)

(1) Supervised Unsupervised visitation with the minor(s) from _____ at _____ a.m. p.m. to _____ at _____ a.m. p.m.

(2) Other Visitation/Orders (specify): _____

continued on attachment 6.

Date: _____

Signature of Attorney

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____

Signature of Petitioner