**The Family Court of the State of Delaware**

In and For [ ]  New Castle County [ ]  Kent County [ ]  Sussex County

**PETITION FOR PARENTAL VISITATION**

*Petitioner Respondent*

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  Name | D.O. B. |  |  Name | D.O.B. |  | File Number      |
|        |        |  |        |        |  |
|  Street Address  |  |  Street Address  |  |
|        |  |        |  |
|  P.O. Box Number |  |  P.O. Box Number |  | Petition Number      |
|        |  |        |  |
|  City/State/Zip Code |  |  City/State/Zip Code  |  |
|        |  |        |  |
|  Attorney Name  |  |  Attorney Name  |  |  |
|        |  |        |  |
|  Interpreter needed? [ ]  Yes [ ]  No |  |  Interpreter needed? [ ]  Yes [ ]  No |  |  |
|  Language       |  |  Language       |  |  |

IN THE INTEREST OF the following child(ren):

|  |  |  |  |
| --- | --- | --- | --- |
| Name | Date of Birth | Name | Date of Birth |
|       |       |       |       |
| Name | Date of Birth | Name | Date of Birth |
|       |       |       |       |
| Name | Date of Birth | Name | Date of Birth |
|       |       |       |       |

|  |  |
| --- | --- |
| The said child(ren) live with (Name): |       |
| Relationship to child(ren): |       |
|       |       |     |       |

(STREET ADDRESS) (CITY) (STATE) (ZIP CODE)

Petitioner alleges the following facts: (Please list in consecutively numbered paragraphs. Attach additional pages if needed.)

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|       |

Petitioner requests that Visitation be as follows: (Attach additional pages if needed.)

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|       |

WHEREFORE, Petitioner prays that a Summons issue to Respondent and that the Court grant the relief prayed for or such relief as may be just.

|  |  |  |
| --- | --- | --- |
| SWORN TO AND SUBSCRIBED before me this date, |  |  |
|       |       |
|  | Petitioner/Attorney |
|       |  |
| Notary Public/Clerk of Court |