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

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

**PETITION TO MODIFY 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       |  |  |

## 2nd Petitioner (if any) 2nd Respondent (if any)

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name |  D.O.B |  |  Name |  D.O.B. |  |
|        |        |  |        |        |  |
|  Street Address  |  |  Street Address  |  |
|        |  |        |  |
|  P.O. Box Number |  |  P.O. Box 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 requests the Court enter an order modifying a prior visitation order of this Court issued by

|  |  |  |  |
| --- | --- | --- | --- |
|       | , dated  |       | , and in support there of alleges the following  |

 (Judicial Officer) (mm/dd/yy)

circumstances. (Please list in consecutively numbered paragraphs):

|  |
| --- |
|       |

Petitioner requests that Visitation be as follows:

|  |
| --- |
|       |

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

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