

ATTORNEY OR PARTY WITHOUT ATTORNEY <i>(Name and Address)</i> :   TELEPHONE NUMBER:   ATTORNEY FOR: <i>(name)</i> :	FOR COURT USE ONLY
<p><b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA</b></p> STREET ADDRESS: MAILING ADDRESS: 191 North First Street CITY AND ZIP CODE: San Jose, CA 95113 BRANCH:	
In the Matter of (Name of Child), a Minor, [D.O.B. _____]	
<p><b>PETITION AND ORDER RE HEARING TO REVIEW CASE</b></p>	CASE NUMBER:

Petitioner is the Court Appointed Child Advocate with respect to the Minor. Petitioner requests that the case be set for *(check one)*:

- An *ex parte* review (Minor and parents **are not** required to attend).
- A *parte* review (Minor and parents **are** required to attend).

Reason for request: \_\_\_\_\_  
 \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_  
 Type / Print Name: \_\_\_\_\_

**COURT ORDER**

- The Petition is granted.  
 The case is set for hearing on: \_\_\_\_\_  
 Petitioner shall give ten days' notice of hearing date to:
 

<input type="checkbox"/> District Attorney	<input type="checkbox"/> Attorney for child
<input type="checkbox"/> Parent(s) or Guardian(s)	<input type="checkbox"/> Probation Department
<input type="checkbox"/> Child	<input type="checkbox"/> Other: _____
- The Petition is denied.
- Additional Orders: \_\_\_\_\_  
 \_\_\_\_\_

Date: \_\_\_\_\_  
 \_\_\_\_\_  
 Judicial Officer