

Person Filing: \_\_\_\_\_  
Address (if not protected): \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
ATLAS Number: \_\_\_\_\_  
Lawyer's Bar Number: \_\_\_\_\_

For Clerk's Use Only

Representing  Self, without a Lawyer or  Attorney for  Petitioner OR  Respondent

## SUPERIOR COURT OF ARIZONA IN COCHISE COUNTY

Regarding the Matter of:

Case Number \_\_\_\_\_

\_\_\_\_\_  
Name of Grandparent(s) Requesting Visitation

### PETITION FOR GRANDPARENT VISITATION A.R.S § 25-409

\_\_\_\_\_  
Name of *Other* Grandparent (if applicable)

\_\_\_\_\_  
Name of Mother  DECEASED  
(if applicable)

\_\_\_\_\_  
Name of Father  DECEASED  
(if applicable)

\_\_\_\_\_  
Name of Legal Guardian, if any

There is an existing Family Court case in this county between the mother and the father of the children for whom I want an order of visitation, and I have listed that case number above as required by Arizona law (A.R.S. § 25-409(E)).

### General Information:

**1. Information about me (or us), the Grandparent(s):**

Name(s): \_\_\_\_\_

Address: \_\_\_\_\_

County of residence: \_\_\_\_\_

Occupation(s): \_\_\_\_\_

My / Our relationship to minor child(ren) for whom I want the VISITATION order:

- |   |   |
|---|---|
| <input type="checkbox"/> Grandparent on Mother's side | <input type="checkbox"/> Great Grandparent on Mother's side |
| <input type="checkbox"/> Grandparent on Father's side | <input type="checkbox"/> Great Grandparent on Father's side |
| <input type="checkbox"/> Other: (explain):            |   |

\_\_\_\_\_  
\_\_\_\_\_

**2. Information about the mother of minor child(ren)**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
County of residence: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Occupation: \_\_\_\_\_

**3. Information about the father of minor child(ren)**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
County of residence: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Occupation: \_\_\_\_\_

**4. Information about other legal guardians of minor child(ren), if any:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
County of residence: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
Occupation: \_\_\_\_\_

**5. Information about minor children for whom I / We want the visitation order:**

Name: _____	Name: _____
Birthdate: _____	Birthdate: _____
Current Address: _____	Current Address: _____
_____	_____
County of residence: _____	County of residence: _____
Father: _____	Father: _____
Mother: _____	Mother: _____

Name: _____	Name: _____
Birthdate: _____	Birthdate: _____
Current Address: _____	Current Address: _____
_____	_____
County of residence: _____	County of residence: _____
Father: _____	Father: _____
Mother: _____	Mother: _____

**6. Legal Reason why I/We have a right to request a visitation order:** (check whichever applies)

A.  Parents of minor child(ren) have been divorced for at least 3 months:  
Date of Divorce: \_\_\_\_\_ Court case number: \_\_\_\_\_  
Name of Court: \_\_\_\_\_  
Court Address/Location: \_\_\_\_\_

B.  Child(ren) were born out of wedlock (List names of children born out of wedlock) :  
\_\_\_\_\_  
\_\_\_\_\_

C.  Mother OR  Father of minor child(ren) has been dead for at least 3 months:  
Date of Death: \_\_\_\_\_

D.  Mother OR  Father of minor child(ren) has been missing for at least 3 months:  
Date parent discovered to be missing: \_\_\_\_\_  
Date reported to Law enforcement agency: \_\_\_\_\_  
Name, location of agency: \_\_\_\_\_

E. If you are asking for visitation rights as PATERNAL grandparent(s), that is, you are the parent(s) or grandparent(s) of the *father* of the minor children, complete the information below: **PATERNITY WAS ESTABLISHED BY: (check one box)**

- A Court Order for Paternity\* from this county or previously *transferred to* this county. **(A.R.S. § 25-502(c))**
- Filing an Acknowledgment of Paternity through the Hospital Paternity Program or other means allowed by law on or after July 21, 1996 **(A.R.S. § 25-812-814, or § 36-334)**.
- Child Support Order\*: An Order for Child Support has been issued which names my/our son/grandson as the father. (Supply information about the Order as requested below.)
- Marriage: Parties were legally married when child(ren) was (were) born, conceived or adopted.

\*Note: Documents mentioned above or giving proof of the above should already be in the case file or attached.

**7. Statements about your relationship with minor child(ren) for the last 6 months, and why you think it is best for the child(ren) that you have visitation with them:**  
\_\_\_\_\_  
\_\_\_\_\_

8. Your plan for visitation for the good of minor child(ren): (be specific)

\_\_\_\_\_  
\_\_\_\_\_

TRANSPORTATION will be provided by (name): \_\_\_\_\_ as follows:  
(explain)

\_\_\_\_\_  
\_\_\_\_\_

During WEEKENDS: (explain specifically)

\_\_\_\_\_  
\_\_\_\_\_

During the SUMMER MONTHS OR SCHOOL BREAKS: (explain specifically)

\_\_\_\_\_  
\_\_\_\_\_

FOR HOLIDAYS AND BIRTHDAYS: (explain specifically)

\_\_\_\_\_  
\_\_\_\_\_

FOR TELEPHONE CALLS: (explain specifically)

\_\_\_\_\_  
\_\_\_\_\_

OTHER: (explain specifically)

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**OTHER INFORMATION ABOUT THE CHILD(REN):**

9. **Where the child(ren) who is/are under 18 years of age have lived for the last 5 years.**  
(Attach extra pages if necessary.)

Child's Name: \_\_\_\_\_  
Lived with: \_\_\_\_\_  
Street address: \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Relationship to child: \_\_\_\_\_  
City, State \_\_\_\_\_

Child's Name: \_\_\_\_\_  
Lived with: \_\_\_\_\_  
Street address: \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Relationship to child: \_\_\_\_\_  
City, State \_\_\_\_\_

Child's Name: \_\_\_\_\_  
Lived with: \_\_\_\_\_  
Street address: \_\_\_\_\_

Dates: From \_\_\_\_\_ To \_\_\_\_\_  
Relationship to child: \_\_\_\_\_  
City, State \_\_\_\_\_

**10. Court cases NOT involving legal decision making, physical custody, parenting time or visitation related to the child(ren) under 18 years old. (check one box)**

I HAVE  I HAVE NOT been a party or a witness in court in this state or in any other state regarding issues OTHER THAN legal decision making, custody, parenting time or visitation of any of the child(ren) named above (If so, explain below, using extra pages if necessary. IF NOT, GO ON.)

Name of each child: \_\_\_\_\_  
Court state: \_\_\_\_\_ Court location: \_\_\_\_\_  
Court case number: \_\_\_\_\_ Current status: \_\_\_\_\_  
How the child is involved: \_\_\_\_\_  
Summary of any Court Order: \_\_\_\_\_

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**11. Court cases INVOLVING legal decision making, physical custody, parenting time or visitation cases related to child(ren) under 18 years old. (check one box)**

I DO HAVE  I DO NOT HAVE information about a legal decision making, custody, parenting time or visitation court case relating to any of the children named above that is pending in this state or in any other state (If so, explain below, using extra pages if necessary. IF NOT, GO ON).

Name of each child: \_\_\_\_\_  
Court state: \_\_\_\_\_ Court location: \_\_\_\_\_  
Court case number: \_\_\_\_\_ Current status: \_\_\_\_\_  
How the child is involved: \_\_\_\_\_  
Summary of any Court Order: \_\_\_\_\_

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**12. Legal decision making, custody, parenting time or visitation claims of any person. (check one box)**

I DO KNOW  I DO NOT KNOW a person other than the Petitioner or the Respondent with whom the children are now living or who claims legal decision making authority, custody, parenting time or visitation rights to any of the children named above.  
If so, explain below. Use extra pages if necessary. IF NOT, GO ON).

Name of each child: \_\_\_\_\_  
Name of person with the claim: \_\_\_\_\_  
Address of person with the claim: \_\_\_\_\_  
Nature of the claim: \_\_\_\_\_

**Other Statements to the Court:**

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**13. VENUE:** This is the proper court to bring this lawsuit under Arizona law because it is the county of residence of the petitioner, or the respondent, or the child(ren).

**REQUEST MADE TO COURT:**

- (1) For court order for visitation as described above, and
- (2) For such other orders as this court considers just and fair.

**ACKNOWLEDGMENT AND SIGNATURE OF GRANDPARENT(S)**

**I state to the Court under penalty of perjury that the contents of this document are true and correct.**

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**PRINTED Name**

\_\_\_\_\_  
**SIGNATURE**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**PRINTED Name**