

Code: 2350

Name: _____

Address: _____

Telephone: _____

Email: _____

Self-Represented Litigant

IN THE FAMILY DIVISION
OF THE SECOND JUDICIAL DISTRICT COURT OF THE STATE OF NEVADA
IN AND FOR THE COUNTY OF WASHOE

_____,
Plaintiff / Petitioner / Joint Petitioner,

Case No. _____

vs.

Dept. No. _____

_____,
Defendant / Respondent / Joint Petitioner.

_____ /

MOTION FOR CHANGE OF CUSTODY OR VISITATION

*This form must be fully completed and filed along with the Declaration of Moving Party.
If more room is needed for any section, attach additional sheets.*

1. There has been a substantial change in circumstances affecting the welfare of the children and modification serves the best interest of the children. I am requesting the following (*check all that apply*):

A change in legal custody (the right to make major decisions regarding the children, including health, education, and religion)

A change in physical custody (involves the amount of time a child resides with a parent)

A change in the general visitation schedule

A review and change in the amount of child support

Other: _____

2. Children

There are (*number*) _____ minor children in common born or adopted by the parties.

NAME	AGE	DATE OF BIRTH
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

3. What is the current court-ordered custody schedule?

4. What is the actual custody schedule that you are currently following?

5. Describe the substantial changes in circumstances that are affecting the welfare of the children:

Explain in detail why you believe that changing custody and/or visitation is in the children's best interest:

6. Legal Custody of the Minor Children

Who should have **legal custody** of the minor children? Legal custody means having legal responsibility for the children and making major decisions regarding the children, including the children’s health, education, religious upbringing, and extracurricular activities.

Both Parents: Joint legal custody

or

Me: Sole legal custody

or

The other parent: Sole legal custody

7. Physical Custody of the Minor Children

Who should have physical custody of the minor children? (*Physical custody refers to the amount of time that the children physically spend in the care of each parent.*)

Both Parents: Joint physical custody (50/50% to 60/40%)

or

I **or** the other parent should have primary physical custody (*more than 60%*)

or

I **or** the other parent should have sole physical custody (*children reside with only one parent and the noncustodial parent’s parenting time is restricted to no significant in-person parenting time*)

8. Custody/Visitation and Exchange Schedule

a. Regular Custodial Schedule

Place an “X” in a box to select **ONLY ONE** of the custody schedules provided below. If you would like to modify Options 1 – 4 or select Option 5, write in your proposed schedule below. A detailed description of each custody schedule is provided on the Court’s website.

Option 1 – Week On / Week Off (Joint physical custody):

The minor children should spend one week with me and spend the following week with the other parent. This schedule should alternate every week throughout the year.

The exchanges should be at (*time*) _____ a.m. **or** p.m.
and should take place on (*day of the week*) _____ at
(*location*) _____.

I **or** the other parent should have the children the first week following granting of the Motion.

NOTE: This schedule is often used when the parents have school-age children.

Option 2 – Two / Two / Five / Five (Joint physical custody):

The minor children should spend every Monday and Tuesday with one parent, every Wednesday and Thursday with the other parent, and alternate the weekends (Friday through Sunday) with each parent.

The exchanges should be at (*time*) _____ a.m. **or** p.m. and should take place at (*location*) _____.

I **or** the other parent should have the children every Monday and Tuesday.

I **or** the other parent should have the children every Wednesday and Thursday.

I **or** the other parent should have the children the first weekend following granting of the Motion and the parents should alternate each weekend thereafter.

NOTE: This schedule is often used when the parents have preschool or young school-age children.

Option 3 - Repeating Two / Two / Three (Joint physical custody):

The minor children should spend two days with one parent, then two days with the other parent, three days with one parent, two days with the other parent, two days with one parent, three days with the other parent, alternating throughout the year.

The exchanges should be at (*time*) _____ a.m. **or** p.m. and should take place at (*location*) _____.

I **or** the other parent should have the children the first Monday following granting of the Motion.

NOTE: This schedule is often used when the parents have very young children.

Holidays

- **1st Half of Spring Break** (Begins upon release of school and ends at 9 a.m. halfway through the break.)
Me: Even Numbered Years Odd Numbered Years
Other parent: Even Numbered Years Odd Numbered Years
- **2nd Half of Spring Break** (Begins at 9 a.m. halfway through the break and ends when school resumes.)
Me: Even Numbered Years Odd Numbered Years
Other parent: Even Numbered Years Odd Numbered Years
- **Mother's Day** (Begins 7 p.m. evening before Mother's Day; ends 9 a.m. the morning after.)
Me: Even Numbered Years Odd Numbered Years
Other parent: Even Numbered Years Odd Numbered Years
- **Father's Day** (Begins 7 p.m. evening before Father's Day; ends 9 a.m. the morning after.)
Me: Even Numbered Years Odd Numbered Years
Other parent: Even Numbered Years Odd Numbered Years
- **4th of July**
(Begins 7 p.m. on July 3rd; ends at 9 a.m. on July 5th.)
Me: Even Numbered Years Odd Numbered Years
Other parent: Even Numbered Years Odd Numbered Years
- **Halloween** (Begins 7 p.m. on October 30th; ends at 9 a.m. on November 1st.)
Me: Even Numbered Years Odd Numbered Years
Other parent: Even Numbered Years Odd Numbered Years
- **Fall Break**
(Begins upon release of school and ends when school resumes.)
Me: Even Numbered Years Odd Numbered Years
Other parent: Even Numbered Years Odd Numbered Years

- **Thanksgiving Break** (Begins upon release of school and ends when school resumes.)
 Me: Even Numbered Years Odd Numbered Years
 Other parent: Even Numbered Years Odd Numbered Years

- **1st Half of Winter Break** (Begins upon release of school and ends at 9 a.m. on December 26th.)
 Me: Even Numbered Years Odd Numbered Years
 Other parent: Even Numbered Years Odd Numbered Years

- **2nd Half of Winter Break** (Begins at 9 a.m. on December 26th and ends when school resumes.)
 Me: Even Numbered Years Odd Numbered Years
 Other parent: Even Numbered Years Odd Numbered Years

- **Other:** _____
 Me: Even Numbered Years Odd Numbered Years
 Other parent: Even Numbered Years Odd Numbered Years

- **Other:** _____
 Me: Even Numbered Years Odd Numbered Years
 Other parent: Even Numbered Years Odd Numbered Years

- **Other:** _____
 Me: Even Numbered Years Odd Numbered Years
 Other parent: Even Numbered Years Odd Numbered Years

9. Transportation For Exchanges

Place an “X” in a box to select ONLY ONE of the statements below and complete the requested information.

- Transportation should be provided by the parent
- picking up
 - dropping off the children.

or

- Transportation should be provided as follows (*explain how transportation should be provided*):

10. Best Interest Factors

The requested custody and visitation schedule is in the best interest of the children for the following reasons (*Answer each question. Describe in detail why the change in the custody and visitation schedule is in the best interest of the children.*):

a. Are the children old enough and / or capable of having a preference in the custody and visitation? (*check one*)

No

Yes. If known, what is their preference and why?

b. Is one parent more likely to allow the children to have frequent contact and a continuing relationship with the other parent? (*check one*)

No

Yes, (*name of parent*) _____ is because:

c. How do you and the other parent get along?

d. Are you and the other parent able to cooperate to meet the needs of the children? (*check one*)

No, and the current custody and visitation schedule is not in the best interest of the children because:

Yes

e. Describe your mental and physical health:

Describe the other parent's mental and physical health:

f. What physical, developmental, and emotional needs do the children have?

g. How will the proposed custody/visitation change affect the physical, developmental, and/or emotional needs of the children?

h. What do you and your children do together?

i. What does the other parent do with the children when they are together?

j. Has there been a history of parental abuse or neglect of the children or any siblings of the child(ren), or a history of domestic violence against the children, you, or the other parent, or any other person who lives with the children? (*check all that apply*)

No

Yes, I have a history; the abuse, neglect, and / or act of domestic violence was (*include case number(s), if any and if known*):

Yes, the other parent has a history; the abuse, neglect, and / or act of domestic violence was (*include case number(s), if any and if known*):

k. Have you or the other parent committed an act of abduction against the child(ren) or any other child? (*check all that apply*)

No

Yes, I have a history; the act of abduction was:

Yes, the other parent has a history; the act of abduction was:

I. Is there a nomination of a guardian? (check one)

No

Yes, the names of the nominated guardians are:

11. UCCJEA Declaration

a. Persons Other Than You or the Other Parent Who Claim Custody/Visitation

Is there anyone other than you or the other parent who has custody of the children or who claim a right to custody or visitation with the children? (*check one*)

No

Yes, the following people have custody or claim custody/visitation of the children (*list names and addresses of anyone who claims custody/visitation rights*):

b. Participation in Other Cases: Have you ever participated in any case concerning these children as a party, witness, or in some other capacity? (check one):

No

Yes, I have participated in the following cases concerning these children (*provide all specifics including the state, the court name, children involved, the case number, and the date of the child custody order, if any*):

c. Knowledge of Other Cases: Do you know of any other cases that could affect this case, such as other custody cases, domestic violence cases, protection order cases, or adoption/terminations? (*check one*):

No.

Yes, the following cases that could affect this case (*give all specifics including the state, the court name, the parties involved, the case number, and the type of case*):

12. Motion/Opposition Notice

Place an "X" in a box to select from the statements below.

1. Has a final decree or custody order been entered in this case?

Yes. If yes, then continue to Question 2.

No. If no, you do not need to answer any other questions.

2. Is this a motion, or an opposition to a motion, filed to change a final order?

Yes. If yes, then continue to Question 3.

No. If no, you do not need to answer any other questions.

3. Is this a motion, or an opposition to a motion, filed only to change the amount of child support?

Yes

No

4. Is this a motion, or an opposition to a motion, for reconsideration or a new trial, AND the motion was filed within 14 days of the Judge's Order?

Yes. If yes, write the filing date found on the front page of the Judge's Order:
(*date of the Judge's Order*) _____

No

Note: If you answered "No" to either Question 1 or 2, or "Yes" to Question 3 or 4, you are exempt from a filing fee. However, if the Court later determines you should have paid the filing fee, your motion (or opposition) will not be decided until the fee is paid.

This document does not contain the personal information of any person as defined by NRS 603A.040.

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

Date: _____ Your signature: _____

Print your name: _____

VERIFICATION

I hereby declare under penalty of perjury that I have read the foregoing Motion for Change of Custody or Visitation and know the contents thereof; this pleading is true and correct to the best of my knowledge, except for those matters stated upon information and belief, and as to those matters, I believe them to be true.

I declare, under penalty of perjury under the law of the State of Nevada, that the foregoing is true and correct.

DATED this _____ day of _____, 20_____.

Your signature: _____

Print your name: _____

To the person receiving this Motion:

- You have 14 days to file an Opposition (17 days if you were served by U.S. Mail).
- If you do not file an Opposition, the Court may consider your nonresponse as agreement to this Motion and may grant the Motion.

To the person who filed this Motion:

- If the other party files an Opposition, you have 7 days to file a Reply (10 days if you were served by U.S. Mail).
- Whether or not the other party files an Opposition, you must file the Request for Submission to have the Motion reviewed by the judge.
- You must allow the other party the full amount of time to oppose the Motion before filing the Request for Submission.