

1 Code: 2350

2 Name: _____

3 Address: _____

4 Telephone: _____

5 Email: _____

6 Self-Represented Litigant

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

10 _____,
11 Plaintiff / Petitioner / Joint Petitioner,

Case No. _____

12 vs.

Dept. No. _____

13 _____,
14 Defendant / Respondent / Joint Petitioner.

15 _____/
16 MOTION FOR CHANGE OF CUSTODY OR VISITATION

17 *Type of Motion*

18 Place an "X" in the box(es) that describe what you are requesting from the Court.

19
20 A. A change in custody

21 A change in the general visitation schedule

22 Other: _____

23
24 B. The name(s) and date(s) of birth of the minor child(ren) involved in this matter are:

25 Name _____ Date of Birth _____

26 Name _____ Date of Birth _____

27 Name _____ Date of Birth _____

28 If more room is needed, attach additional sheets.

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Relief Requested and Argument
Describe what you want the Court to order. In detail, tell the Court what you are asking for and why you believe you should be granted your request(s).

C. _____

If more room is needed, attach additional sheets.

Best Interest

Answer each question.

Describe, in detail, why the requested custody and visitation schedule is in the best interest of the child(ren). If you need more room to answer the questions attach additional sheets.

D. The requested custody and visitation schedule is in the best interest of the minor child(ren) for the following reasons:

1. The minor child(ren) **IS/ARE** -OR- **IS NOT/ARE NOT** old enough and capable of having a preference in the custody and visitation.

If the minor child(ren) is/are, their age(s) and preference(s) is/are:

2. There **IS** -OR- **IS NOT** a nomination of a guardian. If there is, the name(s) of the nominated guardian(s) is/are: _____

3. **I AM** -OR- **THE OTHER PARENT** is more likely to allow the minor child(ren) to have frequent contact with and a continuing relationship with the other parent because:

-OR- **NOT APPLICABLE**

4. The level of conflict between the other parent and me is: _____

therefore the proposed custody and visitation schedule is in the best interest of the minor child(ren).

5. Me and the other parent **ARE** able to cooperate to meet the needs of the minor child(ren).

-OR-

Me and the other parent **ARE NOT** able to cooperate to meet the needs of the minor child(ren) and the proposed custody and visitation schedule is in the best interest of the minor child(ren) because: _____

1 6. My mental and physical health is: _____

2 _____

3 The other parent's mental and physical health is: _____

4 _____

5
6 7. The minor child(ren) have the following physical, developmental, and emotional needs:

7 _____

8
9 8. My relationship with the minor child(ren) is: _____

10 _____

11 The other parent's relationship with the minor child(ren) is: _____

12 _____

13
14 9. This custody and visitation schedule **WILL** -OR- **WILL NOT** allow the minor
15 child(ren) to maintain a relationship with siblings.

16 -OR- **NOT APPLICABLE**

17
18 10. I **HAVE** -OR- **DO NOT HAVE** a history of parental abuse or neglect of the minor
19 child(ren) or any sibling of the minor child(ren), or a history of domestic violence against the
20 minor child(ren), the other parent, or any other person who lives with the minor
21 child(ren). If there is a history, the abuse, neglect, or act of domestic violence was:

22 (Include case number(s), if any and if known) _____

23 The other parent **HAS** -OR- **DOES NOT HAVE** a history of parental abuse or
24 neglect of the minor child(ren) or any sibling of the minor child(ren), or a history of domestic
25 violence against the minor child(ren), myself, or any other person who lives with the minor
26 child(ren).

27 If there is a history, the abuse, neglect, or act of domestic violence was:

28 (Include case number(s), if any and if known) _____

1 11. I **HAVE** -OR- **HAVE NOT** committed an act of abduction against the minor
2 child(ren) or any other child.

3 If there is a history, the act of abduction was: _____
4 _____

5 The other parent **HAS** -OR- **HAS NOT** committed an act of abduction against the
6 minor child(ren) or any other child.

7 If there is a history, the act of abduction was: _____
8 _____

9
10 This document does not contain the personal information of any person as defined by NRS
11 603A.040.

12 I declare under penalty of perjury under the law of the State of Nevada that the foregoing
13 statements are true and correct.

14
15
16 Date: _____

Your Signature: _____

17
18 Print Your Name: _____

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25 **When to File:** If you do not file an opposition/response to this request with the Court within ten
26 (10) days, beginning the day after service, the person who filed this request may submit it to the
27 Court for decision. **Please note: parties who are served by U.S. Mail have three (3) additional**
28 **days, a total of thirteen (13) days, to file an opposition/response.**

