

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name and Address</i>): TELEPHONE NUMBER:	FOR COURT USE ONLY
ATTORNEY FOR: (<i>name</i>): SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA STREET ADDRESS: MAILING ADDRESS: 191 North First Street CITY AND ZIP CODE: San José, California 95113 BRANCH NAME:	
Name of Child:	
DECLARATION RE NOTICE OF EX PARTE APPLICATION (JUVENILE)	CASE NUMBER: DEPT. NUMBER:

I, the undersigned, declare:

1. I am counsel social worker mother father minor Department of Family and Children's Services probation officer or other (*explain*) _____ in this juvenile matter.

2. **Notice:** Pursuant to Juvenile Court Rules I have given notice of, and a copy of this application for ex parte orders, to the following persons **in the following manner:**

<u>Counsel or Party</u>	<u>Date</u>	<u>Time</u>	<u>Manner of Notice</u>
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- a.
- b.
- c.
- d.

3. **Responses:** I have received the following responses; and have attached all responses:

- a.
- b.
- c.
- d.

4. **Due Diligence:** With respect to any party who opposes the petitioner's request or whose position is now known at the time the request is submitted, I have described all efforts made to determine that party's position and/or to reach agreement: (you may attach additional pages if necessary)

- a.
- b.
- c.
- d.

NAME OF CHILD:	CASE NUMBER:
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5. I have not given notice of this application for ex parte orders for the following reason(s):
- a. Would frustrate the purpose of the orders requested.
 - b. Minor child would suffer immediate and irreparable harm before the orders could issue.
 - c. No significant burden or inconvenience to the responding party will result from the orders requested.
 - d. I made reasonable, good faith efforts to give notice, as follows: _____

 - e. Other: _____

I declare under penalty of perjury the laws of the State of California the foregoing is true and correct, at _____
_____, California this ____ day of _____ 20____, at _____ AM PM.

Date:

Signature of Declarant