

ATTORNEY OR PARTY WITHOUT AN ATTORNEY (Name, State bar number, and address)  TELEPHONE NO.: _____ FAX NO.: _____ ATTORNEY FOR (Name): _____	<b>FOR COURT USE ONLY</b>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA PROBATE DIVISION 191 NORTH FIRST STREET SAN JOSE, CA 95113	
GUARDIANSHIP OF: _____  <div style="text-align: right;">MINOR</div>	
<b>VISITATION ORDER</b>	CASE NUMBER _____

1. The petition to grant visitation came on for hearing as follows (*check boxes c, d, e, f, g, h to indicate personal presence*):
- a. Judge (*name*): \_\_\_\_\_
  - b. Hearing date: \_\_\_\_\_ Time: \_\_\_\_\_ Dept: \_\_\_\_\_
  - c.  Petitioner (*name*): \_\_\_\_\_
  - d.  Attorney for petitioner (*name*): \_\_\_\_\_
  - e.  Minor: \_\_\_\_\_
  - f.  Attorney for minor (*name*): \_\_\_\_\_
  - g.  Guardian(s): \_\_\_\_\_
  - h.  Attorney for guardian(s): \_\_\_\_\_
  - i.  Other(s): \_\_\_\_\_

**THE COURT FINDS**

2. a. All notices required by law have been given
- b.  Notice of hearing to the following persons  has been  should be dispensed with (*names*): \_\_\_\_\_
- c. Visitation by the petitioner is in the best interest of the child.

**THE COURT ORDERS**

3.  Parties are ordered to orientation and mediation at Family Court Services (408) 534-5760 to determine a visitation schedule.
- a.  Parties are ordered to appear for a review hearing:  
 Date: \_\_\_\_\_ Time: \_\_\_\_\_ Dept: \_\_\_\_\_
4.  Parties are ordered to follow the attached visitation schedule.
5.  Other (*specify*): \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_

JUDGE OF THE SUPERIOR COURT