**IMPORTANT INFORMATION REGARDING**

**THE FILING OF A MOTION FOR TEMPORARY VISITATION**

**Presenting a motion before the Court requires the completion and filing of three separate documents.**

**The Motion for Temporary Visitation document (Form 261) must be filed along with the Notice of Motion (Form 192) and Form of Order (Form 193) documents.**

**Please note that a Motion for Temporary Visitation should be filed only after Respondent has been served with the underlying petition.**

**The Family Court of the State of Delaware**



In and For  New Castle County  Kent County  Sussex County

## MOTION FOR TEMPORARY VISITATION

## Petitioner Respondent

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name |  | Name | |  | File Number |
|  |  |  | |  |  |
| Street Address (including apartment) |  | Street Address (including apartment) | |  |  |
|  |  |  | |  |  |
| P.O. Box Number |  | P.O. Box Number | |  | Petition Number |
|  |  |  | |  |  |
| City/State/Zip Code |  | City/State/Zip Code | |  |  |
|  |  |  | |  |  |
| D.O.B. |  | D.O.B. | |  |  |
|  |  |  |  |  |  |
| Attorne Attorney Name |  | A Attorney Name | |  |  |
|  |  |  | |  |  |
| Interpreter needed? Yes  No |  | Interpreter needed? Yes  No | |  |  |
| Language: |  | Language: | |  |  |

Pursuant to Civil Rule 65.2 (d), Movant respectfully moves this Court to enter an Order of Temporary Visitation of the following children (please provide full name and date of birth):

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name: | DOB: |  | Name: | DOB: |
| Name: | DOB: |  | Name: | DOB: |
| Name: | DOB: |  | Name: | DOB: |

In support of this Motion, the Movant states as follows:

|  |  |  |  |
| --- | --- | --- | --- |
| 1) | The date the underlying petition was served was: |  | **\*** |
| 2) | There is no existing enforceable contact schedule *(Including a contact schedule within an active Protection* | | |
| *from Abuse Order)* AND | | | |
| 3) | Petitioner is experiencing less contact with his/her child(ren) than that which is routinely awarded by the Court. | | |
|  | 1. I am currently experiencing       hours per week/month (circle one) of visitation. | | |
| 4) |  | | |
|  |  | | |
|  |  | | |
|  |  | | |

**I understand that this Motion should be filed only after Respondent has been served with the underlying petition.**

|  |  |
| --- | --- |
|  |  |
| Movant Print |

|  |  |
| --- | --- |
|  |  |
| Movant Signature |

|  |  |
| --- | --- |
| SWORN TO AND SUBSCRIBED before me this date: |  |
|  |  |
| Notary Public/Deputy Clerk of Court |

**\***The Family Court Call Center can provide the date of service (302) 255-0300.

**Affidavit of Mailing**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| I, the Movant, affirm that a true and correct copy of this Motion was placed in the U.S. Mail on the | | | |  | |
| day of |  | and sent to the other party or attorney at the address listed on the petition, | | | |
| first class postage pre-paid. | | | | | |
|  | | |  | |  |
|  | | | Movant Signature | |  |
| Sworn to subscribed before me this       day of       , | | | | | |
|  | | |  | |  |
|  | | | Clerk of Court/Notary Public | |  |

**The Family Court of the State of Delaware**



In and For  New Castle County  Kent County  Sussex County

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  | ) |  | |
|  | , | ) |  | |
| Petitioner |  | ) | File No.: |  |
| v. |  | ) |  | |
|  |  | ) | Petition No.: |  |
|  | , | ) |  | |
| Respondent |  | ) |  | |
|  |  | ) |  | |
|  |  | ) |  | |

**NOTICE OF MOTION**

TO:

|  |  |
| --- | --- |
| PLEASE TAKE NOTICE that the attached Motion for |  |

is herewith presented to the Court for consideration. If you are opposed to this motion, you must file a written response with the Court within ten (10) days of the service of this motion. If no response is timely filed, the motion may be decided without further opportunity for you to be heard on the matter. Family Court Rules, Rule 7(b)(2).

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Date |  | Movant/Attorney |
|  |  |  |
|  |  |  |
|  |  | Print Name |
|  |  |  |
| Name and address of Movant/Attorney |
|  |
| Street Address (including Apt) |
|  |
| P.O. Box Number |
|  |
| City/State/Zip Code |
|  |



**The Family Court of the State of Delaware**

1. In and For  New Castle County  Kent County  Sussex County

)

**(2)**  \_\_\_ ) File No.: \_\_ **(4)** Petitioner )

)

v. ) Petition No.: **(5)**

)

**(3)** \_\_\_ )

Respondant )

)

)

**NOTICE OF MOTION**

TO: **(6)**

PLEASE TAKE NOTICE that the attached Motion **(7)** is herewith presented to the Court for consideration. If you are opposed to this motion, you must file a written response with the Court within ten (10) days of the service of this motion. If no response is timely filed, the motion may be decided without further opportunity for you to be heard on the matter. Family Court Rules, Rule 7(b)(2).

**(8)**

Petitioner/Attorney

|  |  |  |
| --- | --- | --- |
| **(9)** |  | **(10)** |
| Date | Movant/Attorney |
| Name and address of Movant/Attorney |
|  |
| Street Address |
|  |
| P.O. Box Number |
|  |
| City/State/Zip Code |
|  |

**FAMILY COURT FORMS INSTRUCTIONAL MANUAL**

SUBJECT: Form 192, Notice of Motion (Motion Package)

I. Definition

Form 192 is one of two documents that must accompany a motion at the time it is filed in Family Court in accordance with Family Court Rule 7(b)(1). Its purpose is to act as an informational cover sheet which the movant attaches to the copy of the motion that he/she is sending to the other party(ies) in the matter. In this way, the other party(ies) are notified that a motion has been filed in Family Court on a matter in which they have an interest.

II. Preparation

Form 192 is prepared by the movant, or party filing the motion. The original is submitted along with the motion (Form 191) and the form of order (Form 193) at the time of the filing of the motion in Family Court. It is the responsibility of the movant to send a copy of all three forms, completed as appropriate, to the other party(ies). Once it has been filed with the Court, the motion package is sent to Case Processing and then to a judge/commissioner for review. The notice of motion must be served according to Family Court Civil Rule 5(c).

III. Components

The following is entered in the appropriately numbered area(s):

1. An "x" to indicate the appropriate county of the Court.

2. The name of the petitioner.

3. The name of the respondent.

4. The Family Court file number (if known).

5. The Family Court petition number (if known).

6. The names and addresses of the parties to the case and of their attorneys, if applicable.

7. The type of motion being filed.

8. The signature of the attorney/party filing the motion.

9. The date that the motion is being filed.

l0. The name and address of the attorney/party filing the motion.

The Family Court of the State of Delaware



In and For  New Castle County  Kent County  Sussex County

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  |  | ) |  | | |
|  | , | ) |  | | |
| Petitioner |  | ) | File No.: | |  |
| v. |  | ) |  | | |
|  |  | ) | Petition No.: | |  |
|  | , | ) |  | | |
| Respondent |  | ) | In Re: |  | |
|  |  | ) |  |  | |
|  |  | ) |  | | |

## ORDER

|  |  |
| --- | --- |
| Having considered the request of the movant, | , |

|  |  |
| --- | --- |
| **IT IS SO ORDERED**, this date: |  |

|  |
| --- |
| That |

|  |
| --- |
|  |
| Judge/Commissioner |

**CC**:  Petitioner  Respondent  Petitioner Attorney  Respondent Attorney  DAG

PD  Fiscal Services  DCSS  FC.Appointed.Attorneys@state.de.us

|  |  |  |
| --- | --- | --- |
|  | Other |  |