

NAME AND ADDRESS OF PARTY OR ATTORNEY FOR PARTY:	TELEPHONE NUMBER:	<i>FOR COURT USE ONLY</i>
ATTORNEY FOR (Name):		
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA</b> STREET ADDRESS: 201 North First Street, San José, CA 95113 MAILING ADDRESS: 191 North First Street CITY AND ZIP CODE: San José, California 95113 BRANCH: Family Justice Courthouse		
PETITIONER:		CASE NUMBER:
RESPONDENT:		
<b>REQUEST AND ORDER TO CHANGE CASE STATUS OR RESOLUTION CONFERENCE DATE</b>		DEPARTMENT NUMBER:
		FCS NUMBER:

**Current Case Status or Resolution Conference: Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**REQUEST:**

I am asking that our Case Status or Resolution Conference date be changed (*check as many as apply*):

1.  The Respondent has been served in this case.
2.  Petitioner's  Respondent's Preliminary Declaration of Disclosure has been served.
3.  **I have**  **I have not discussed this request with the other party and (*check one*):**
  - a.  We agree
  - b.  We are requesting a Settlement Officer Conference (SOC).
  - c.  We do not agree but I ask the court to grant my request based on the attached declaration.
  - d.  Please see attached declaration where I explain why I have not discussed this request with the other party and why my request should be granted.
  - e.  A no contact restraining order is in effect.
4.  **First change:** This is my first request to change the date. Please schedule the Case Status or Resolution Conference at least 30 days out but not on the following dates because I am NOT available:  
 \_\_\_\_\_
5.  **More than one change:** The Case Status or Resolution Conference has been changed (*number*) \_\_\_\_\_ time(s) already. I am asking that the date be changed again and have attached a declaration that explains my reasons for this request.
6.  **Alternative Dispute Resolution (ADR):** We are asking that the date be changed because we are involved in an alternative dispute resolution process. Please schedule our Conference no more than six (6) months out but not on the following dates because we are NOT available:  
 \_\_\_\_\_
7.  **Reconciliation:** We are asking that the date be changed because we are attempting reconciliation. Please schedule out Conference no more than six months out, but not on the following dates:  
 \_\_\_\_\_
8. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

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

Signature: \_\_\_\_\_

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

Signature: \_\_\_\_\_

PETITIONER:	CASE NUMBER:
RESPONDENT:	

**9. ORDER:**

IT IS HEREBY ORDERED that the request to change the Case Status or Resolution Conference date is:

a.  **Approved**

**The new Case Status  Resolution Conference  is scheduled for:**

Date: \_\_\_\_\_ Time: \_\_\_\_\_  a.m.  p.m. Department: \_\_\_\_\_

b.  **Not Approved.** The parties are ordered to appear at the currently scheduled conference.

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

\_\_\_\_\_  
Judicial Officer:

**INSTRUCTIONS**

**10. Please refer to Superior Court of California, County of Santa Clara’s Local Family Rules of Court for more information.**

- Fill out page 1 of this form.
- Make at least two (2) copies of both sides of this form. If there is an agreement, both parties or counsel need to sign page. If there is no agreement have a copy served by mail to the other party. The server must complete the Proof of Service by Mail section below. **You cannot serve the form yourself.**
- File at the Clerk’s Office at the Family Court Facility, where your case is assigned, at least **20 calendar days** before the currently scheduled Case Status or Resolution Conference:
  - ✓ This original form
  - ✓ All the copies
  - ✓ One stamped envelope addressed to each party or counsel in the case.
- The Clerk’s Office will mail you a copy of this form to let you know if your request was approved or not approved.

**PROOF OF SERVICE BY MAIL (C.C.P. 1013A)**

11. I mailed a copy of the Request and Order to Change Case Status or Resolution Conference Date in sealed envelope as follows:

- a. Mailed from (City) \_\_\_\_\_, (State) \_\_\_\_\_
- b. On (date): \_\_\_\_\_
- c. To (name and address of the person served): \_\_\_\_\_

12. Server’s Information:

- a. Name: \_\_\_\_\_
- b. Address: \_\_\_\_\_
- City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

13. Please also complete the following if you are a registered process server:

County Registration \_\_\_\_\_ Registration Number: \_\_\_\_\_

14. I am over the age of 18 and not a party to this case. I declare under penalty of perjury under the laws of the State of California that the information above is true and correct.

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

\_\_\_\_\_  
Server signs name here

\_\_\_\_\_  
Server prints name here