

**IN THE COURT OF COMMON PLEAS**

JUVENILE

**DIVISION**

ROSS

**COUNTY, OHIO**

IN THE MATTER OF:

\_\_\_\_\_
A Minor

\_\_\_\_\_
Name

Case No. \_\_\_\_\_

\_\_\_\_\_
Street Address

Judge BENSON

\_\_\_\_\_
City, State and Zip Code

Magistrate \_\_\_\_\_

Plaintiff/Petitioner 1

vs./and

\_\_\_\_\_
Name

\_\_\_\_\_
Street Address

\_\_\_\_\_
City, State and Zip Code

Defendant/Petitioner 2/Respondent

**WARNING: This form is not a substitute for the benefit of the advice of legal counsel. It is highly recommended that you consult an attorney.**

**Instructions:** This form is used to request a change in the parenting time (companionship and visitation) order. A Request for Service (Uniform Domestic Relations Form 31/Uniform Juvenile Form 10) and a Parenting Proceeding Affidavit (Uniform Domestic Relations Form – Affidavit 3) must be filed with this Motion. **YOU MUST UPDATE THE CLERK OF COURTS IF ANY OF THE ABOVE CONTACT INFORMATION CHANGES.**

**MOTION FOR CHANGE OF PARENTING TIME (COMPANIONSHIP AND VISITATION)**

Now comes \_\_\_\_\_ (name), the Movant, and requests a change in the existing parenting time (companionship and visitation) order filed on \_\_\_\_\_ (date) regarding the following minor child(ren):

Name of Child

Date of Birth

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Parental rights and responsibilities are currently allocated as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Movant requests that the Court change the parenting time (companionship and visitation) order because:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Movant requests that the Court change the existing parenting time (companionship and visitation) order as follows:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Movant believes that the requested changes are in the child(ren)'s best interest.

Movant requests that the Court order the following: *(check all that apply)*

- Assessing reasonable attorney fees;
- Assessing Court costs of the proceedings;  
and any further relief deemed proper.

\_\_\_\_\_  
Attorney or Self Represented Party Signature

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Fax Number

\_\_\_\_\_  
E-mail

\_\_\_\_\_  
Supreme Court Reg No. (if any)