

IN THE INTEREST OF

Name

Date of Birth

**Stipulation to Revise
Dispositional Order**

Case No. _____

STIPULATION:

The undersigned agree to the following revision(s) to the dispositional order without a court hearing:

(Note: Cannot include change of placement or extension) _____ See attached

Reason(s) for revision(s):

▶ _____

Signature of Parent 1

Print or Type Name

Address

Email Address Telephone Number

Date State Bar No. (if any)

▶ _____

Signature

Print or Type Name

Address

Email Address Telephone Number

Date State Bar No. (if any)

▶ _____

Signature

Print or Type Name

Address

Email Address Telephone Number

Date State Bar No. (if any)

▶ _____

Signature of Parent 2

Print or Type Name

Address

Email Address Telephone Number

Date State Bar No. (if any)

▶ _____

Signature

Print or Type Name

Address

Email Address Telephone Number

Date State Bar No. (if any)

▶ _____

Signature

Print or Type Name

Address

Email Address Telephone Number

Date State Bar No. (if any)

DISTRIBUTION:

- 1. Court
- 2. Child/Juvenile
- 3. Child's/Juvenile's Guardian ad Litem/Adversary Counsel
- 4. Parents
- 5. Parents' Attorney(s)
- 6. Child's Guardian/Legal Custodian

- 7. Relative or Like-Kin Caregiver/Foster Parent
- 8. District Attorney/Corporation Counsel
- 9. Caseworker
- 10. Court Appointed Special Advocate (CASA)
- 11. Tribe
- 12. Indian Custodian