

<input type="checkbox"/> District Court <input type="checkbox"/> Denver Juvenile Court _____ County, Colorado Court Address: _____ <hr/> In re: <input type="checkbox"/> The Marriage of: <input type="checkbox"/> The Civil Union of: <input type="checkbox"/> Parental Responsibilities concerning: _____ Petitioner: and Co-Petitioner/Respondent:	▲ <b>COURT USE ONLY</b> ▲ <hr/> Case Number:  Division                      Courtroom
<b>ORDER FOR AN EVALUATION AND REPORT PURSUANT TO §14-10-127, C.R.S.</b>	

This matter is before the Court on the  Court's motion,  Petitioner's motion,  Co-Petitioner/Respondent's motion or  Stipulation of the parties for the appointment of a licensed mental health professional to perform an evaluation and file a written report concerning the disputed issues relating to the allocation of parental responsibilities.

Pursuant to §14-10-127, C.R.S., the Court hereby appoints the following licensed mental health professional to complete an evaluation:

Name of Evaluator: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Fax #: \_\_\_\_\_ Email: \_\_\_\_\_

The appointed evaluator is required within 7 days of appointment, to disclose to each party, attorneys of record, and the court any familial, financial, or social relationship that the appointed person has or has had with the child, either party, the attorneys of record, or the Judicial Officer (JDF1338)

The evaluation shall be conducted and the report written, pursuant to the criteria outlined in §14-10-127, C.R.S. The report shall be filed with the Court, and a copy to counsel, and any parties not represented by counsel by \_\_\_\_\_ (Date), or at least 21 days prior to the hearing date. This report shall be considered confidential and shall not be available for public inspection unless ordered by the Court.

The  Petitioner,  Co-Petitioner/Respondent, or  both parties, shall deposit monies for the evaluation either  directly to the evaluator, or  with the Court by \_\_\_\_\_ (Date).

Name of Child(ren): \_\_\_\_\_ Date(s) of Birth: \_\_\_\_\_

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

Judge    Magistrate

**CERTIFICATE OF SERVICE**

I certify that on \_\_\_\_\_ (Date), I mailed, faxed, e-filed, or hand-delivered a copy of this Order to the following:

- Attorney for Petitioner or Petitioner *pro se*
- Attorney for Co-Petitioner/Respondent or Co-Petitioner/Respondent *pro se*
- Professional Evaluator
- Other: \_\_\_\_\_

\_\_\_\_\_  
Clerk