JDF 1133		Request for Grandparent Family Time					
1.		☐ District ☐ Juvenile ☐ Probate County: ddress:					
2.	Petitione & Respond	to the Case: r:	This box is for court use only.				
3.	Mailing A	Address:	4. Case Details: Number: Division: Courtroom:				
l sı	I submit this request for parenting time of my (great) grandchildren pursuant to C.R.S. § 14-10-124.4.						
	Note to Responding Parties If you disagree with this request, you must submit a written response within 21 days of the service date (on page 4). Use form JDF 1315 – Response.						
5.	 Prior Filing Have you made this request before, within the last two years? (check one) No. Yes. * * If yes – attach the court order granting permission to file again so soon. 						
6.	Inte	ervenor Information					
		rvenor 1 Legal Name:	Birthdate:				
			n (language)				
	If different from Box 3 above, my (the intervenor's) contact information is:						
		Mailing Address:					

	Phone:		Email:	
	If this ever change	es, file <i>JDF 1312</i> – <i>Co</i>	ntact Information Chang	ie.
l am	the Child's: (check on	e)		
	Grandparent	☐ Great-grandpar	ent	
Inte	rvenor 2			
Full	Legal Name:		Birthd	ate:
Do y	ou need an interprete	er? 🔲 No.	Yes, in (language)	
If dif	fferent from Box 3 abo	ove, my (the intervenor's) contact information is:	
	Mailing Address:			
	Phone:		Email:	
	If this ever change	es, file <i>JDF 1312 – Co</i>	ntact Information Chang	re.
	the Child's: <i>(check on</i>	, <u> </u>	ent	
Par	Grandparent ent Information	, <u> </u>	ent	
Pare Pare	Grandparent ent Information ent 1	☐ Great-grandpar		
Pare Pare	Grandparent ent Information ent 1 Legal Name:	☐ Great-grandpar		
Pare Pare	Grandparent ent Information ent 1 Legal Name: Full Mailing Addre	☐ Great-grandpar		
Pare Pare	Grandparent ent Information ent 1 Legal Name: Full Mailing Addre	☐ Great-grandpar		
Par e Pare Full	Grandparent ent Information ent 1 Legal Name: Full Mailing Addre	☐ Great-grandpar	Email:	
Par e Pare Full	Grandparent ent Information ent 1 Legal Name: Full Mailing Addre Phone: parent has the follow	Great-grandparess:	Email:	
Pare Full	Grandparent ent Information ent 1 Legal Name: Full Mailing Addre Phone: parent has the follow	Great-grandparess:	Email: e children:	
Pare Full This	Grandparent ent Information ent 1 Legal Name: Full Mailing Addre Phone: parent has the follow children's mother	Great-grandpar	Email: e children:	
Pare Full This	Grandparent ent Information ent 1 Legal Name: Full Mailing Addre Phone: parent has the follow Children's mother ent 2 Legal Name:	Great-grandpar	Email: e children: □ other: (identify)	Check if in Military □
Pare Full This	ent Information ent 1 Legal Name: Full Mailing Addre Phone: parent has the follow children's mother ent 2 Legal Name: Full Mailing Addre	Great-grandpar	Email: e children:	Check if in Military □
Pare Full	ent Information ent 1 Legal Name: Full Mailing Addre Phone: parent has the follow children's mother ent 2 Legal Name: Full Mailing Addre Phone:	Great-grandparess:	Email: e children: other: (identify) Email:	_ Check if in Military □

8. Children Information

9.

10.

The minor children are:

Name	Current Address	Sex	Date of Birth				
Were the parent's rights to	erminated? (check one)	☐ Ye	S. *				
* If yes; in case numb	per:						
Are the children Native Ar	Are the children Native American Indian?						
* If yes, which trib	pe?						
Enrollme	nt/Member Number:		·				
Also: file	JDF 1350 – ICWA Assessment.						
Best Interest of the CI	nildren						
It's in the Children's interest to have parenting time with the Intervenors, because:							
Donoutin a Time							
Parenting Time							
The intervenors wish to have the following parenting times:							
			_				
-							

Transportation would be arranged as follows:

Rest	raining Orders
In the	last two years, has a court issued a protection / restraining order against any of the partie
	(yes or no)*
	* If yes, include the case information and describe what happened:
Hear	ing
Do vo	ou want a hearing before the Court decides your request? (check one)
_	
L	No. ☐ Yes.
Cort	ficate of Sarvice
Cert	ficate of Service
I certi	fificate of Service fy that on (service date), I gave a copy of this document to the parties by: (select at least one)
I certi	fy that on (service date), I gave a copy of this document to the
I certi	fy that on (service date), I gave a copy of this document to the parties by: (select at least one)
I certi	fy that on (service date), I gave a copy of this document to the parties by: (select at least one) Colorado Courts E-Filing. www.jbits.courts.state.co.us/efiling Email or Fax to:
I certi	fy that on (service date), I gave a copy of this document to the parties by: (select at least one) Colorado Courts E-Filing. www.jbits.courts.state.co.us/efiling Email or Fax to: Regular Mail, addressed to: (name, full address) Hand Delivery, to: (name, place)
I certi	fy that on (service date), I gave a copy of this document to the parties by: (select at least one) Colorado Courts E-Filing. www.jbits.courts.state.co.us/efiling Email or Fax to:

14. Verified Signatures

Intervenor 1

I declare under penalty of perjury under the law of Colorado the correct.	nat the foregoing is true an	ıd
Executed on the day of	,, at , at	
(city or other location, and state	or country)	
Print Your Name:		
Your Signature:		
Lawyer Signature: (If any)		
Intervenor 2		
I declare under penalty of perjury under the law of Colorado the correct.	hat the foregoing is true an	ıd
Executed on the day of(month)	,, at , (year)	
(city or other location, and state	or country)	<u> </u>
Print Your Name:		
Your Signature:		
Lawyer Signature: (If any)		