		:	
(Your name)	Plaintiff,	:	
VS.		: : No	o C.P.
		:	
	Defendant	:	
	PETITION FO	R SPECIAL RE	ELIEF: CUSTODY
1. Petitioner	is		·
2. Defendan	t is Defendant'	s name	and is the mother,
	the relationship (for e		ont) of the child(ren), and resides at
State	the relationship (for e	xampie, granupai	ent)
	(Address i	ncluding City State	, Zip Code and County)
(Phone #)	(/.tau.000 /.	nordaning Only, Otalo	, E.p. Couo and County)
3. Petitioner	is the mother, _	father, or	of: State the relationship (i.e. grandparent)
Initials* of Child 1		hild's date of birth	
Initials* of Child 2		hild's date of birth	
Initials* of Child 3		hild's date of birth	
Initials* of Child 4		hild's date of birth	
Initials* of Child 5		hild's date of birth	
Initials* of Child 6		hild's date of birth	

^{*}List the full names and ages of child(ren) on the Confidential Information Form (available separately on the susqco.com website) & attach to Petition.

4. Petitioner respectfully represents that o	n, 20, an
Order of Court was entered for (shared legations	al custody)/ (sole legal custody)/
(partial physical custody)/ (shared phys	sical custody)/ (sole physical custody)/
(supervised physical custody). A true and	correct copy of the Order is attached.
5. This Petitioner presents the following al	llegations that put the children in
immediate danger of physical injury or emo	otional harm:
6. Children and Youth Services has/has r (circle one) allegations.	
7. The Petitioner requests the following co	ourt intervention:
Date	Petitioner
	Name and Address of Petitioner:
	Phone #

		:	
(Your name)	Plaintiff,	:	
VS.		: No :	C.P.
	Defendant	: :	
		ORDER	
NOW this _	day of		, 20, upon
consideration of th	ne Petition for Speci	ial Relief filed by	Plaintiff, it is hereby ORDERED
as follows:			
	A hearing is sche	eduled for the	day of,
20, at	o'clockm. at	t the Susquehan	na County Courthouse, 31 Lake
Ave., Montrose, P	ennsylvania 18801.	·	
	The Petition for F	Relief is DENIED	
			BY THE COURT:
			ı

		:			
(Your name)	Plaintiff,	:			
VS.		:	No	CP	
v3.		· · ·		0.1 .	
		:			
	Defendant	:			
	NOTICE* AN	D CERTIFIC	ATE OF SERV	ICE	
To:					
(Name/Address of I	Defendant/Attorney for Othe	er Party)			
The attache	d Petition for Specia	l Relief will be	e presented to t	he Honorable	
	(on	, the	e day of	
	20	, at	o'clock	m., at the	
Susquehanna	County Courthouse,	31 Lake Ave	., Montrose, Pe	nnsylvania 1880.	
l,		, do verify	and say that or	(Date)	,
copy of this En	Defendant's Name) nergency Petition and	d Order of Co	ourt at the addre	ess set forth above by	,
U.S. First Clas	s Mail.				
understand th	ne statements made nat false statements 14 relating to unswo	herein are	made subject t	to the penalties of 18	}
Date		-	0.5		
			(Your Signatu	ure)	

Pro-Se Form: Custody Last Modified 1/3/2020

^{*(}You must serve this notice on all defendants by personal service (handing it to them) or by certified mail and then complete Affidavit of Service.)

		:	
(Your name)	Plaintiff,	:	
VS.		: No.	C.P.
vo .		:	
		:	
	Defendant	:	
	<u>AFFI</u>	DAVIT OF SER	RVICE
Pursi	uant to Pa. R.C.P. No. 19	95.12(d), I here	by certify the following:
1.	1		am the Petitioner in the above
	(Your Name)		
2.	On	, I ca	used to be served upon
	(Date)		
		at	
	(Defendant or his/her at	torney)	(Address where served)
(IF AD	DITIONAL DEFENDANTS)	at	
	(Additional Defendant o		(Address where served)
By: Perso n	al Service / Regular M (Circle one)	ail the attache	ed Petition for Special Relief.
Date			(Your Signature)