

**IN THE COMMON PLEAS COURT OF MONTGOMERY COUNTY, OHIO  
JUVENILE DIVISION**

IN RE:

\_\_\_\_\_

JC# \_\_\_\_\_

\_\_\_\_\_

JC# \_\_\_\_\_

\_\_\_\_\_

JC# \_\_\_\_\_

Minor child(ren)

\_\_\_\_\_  
Name

SETS \_\_\_\_\_

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

Judge \_\_\_\_\_

\_\_\_\_\_  
City, State, and zip code

Magistrate \_\_\_\_\_

Petitioner

vs. / and

vs. / and

\_\_\_\_\_  
Name

\_\_\_\_\_  
Name

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

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

\_\_\_\_\_  
City, State, and zip code

\_\_\_\_\_  
City, State, and zip code

Respondent

Respondent

**MOTION TO INTERVENE**

*This form is to request to become a party to a juvenile court case. A separate motion must be filed with this motion. If more space is needed, add additional pages.*

1. I, \_\_\_\_\_, am the \_\_\_\_\_  
(your name) (your relationship)  
to the following child(ren):

Name of Child	Date of Birth
_____	_____
_____	_____
_____	_____

2. I request to be added as a party to the case because:

3. I am requesting to be made a party to this case because I am seeking one of the following listed below.

I understand that I must file a separate motion for this request along with this motion to intervene.

- Legal Custody
- Visitation/Companionship
- Child Support as a Caretaker
- Other \_\_\_\_\_

4. This motion is submitted by:  Me as a self-represented litigant or  Attorney.

Respectfully Submitted,

---

Your Signature

---

Your Printed Name

---

Attorney Registration Number if applicable

---

Your Street Address

---

Your City, State, and Zip Code

---

Phone number

---

Email address

**Certificate of Service**

I hereby certify that a copy of the foregoing was served on the following parties by certified mail, return receipt requested and / or by personal service on (file date) \_\_\_\_\_.

**[THE PARTY FILING THIS DOCUMENT IS RESPONSIBLE FOR SERVING A COPY ON ALL PARTIES TO THE CASE AND PROVIDING PROOF OF SERVICE TO THE COURT.]**

**List names and complete addresses for all parties to be served, including any attorney or Guardian Ad Litem (GAL) on this case.**

\_\_\_\_\_  
Party's Name

\_\_\_\_\_  
Party's Name

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

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

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

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

\_\_\_\_\_  
Party's Name

\_\_\_\_\_  
Party's Name

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

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

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

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

\_\_\_\_\_  
Party's Name

\_\_\_\_\_  
Party's Name

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

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

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

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

**If checked, please send Notice Only copy to:** (check if case involves child support) Montgomery County CSEA, 1111 S. Edwin C. Moses Blvd., Dayton, OH 45417