

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name and Address):	TELEPHONE NO.:	FOR COURT USE ONLY
_		
ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		
STREET ADDRESS: MAILING ADDRESS:		
CITY AND ZIP CITY:		
BRANCH NAME:		
IN THE MATTER OF (NAME):		
	Petitioner, a minor	
PETITION FOR DECLARATION OF EMANCIPATION OF MINO	R	CASE NUMBER:
ORDER PRESCRIBING NOTICE		
DECLARATION OF EMANCIPATION ORDE	ER DENYING PETITION	
1. My name:		
My address:		
I am a resident of or temporarily domiciled in this county.		
2. I request that the court declare me to be emancipated.		
<ul><li>3. a. I am at least 14 years of age and my date of birth is:</li><li>b. I am willingly living separate and apart from my parents or least 14.</li></ul>	and quardian with the concer	at of my parents or local guardian. I
have been living apart from them since (date):	gai guardian, with the conser	it of my parents of legal guardian. I
c. I am managing my own financial affairs. I have completed m	y declaration of income and e	expenses on form MC-306 and attached
it to this petition.	do - th - low	-
<ul><li>d. No part of my income comes from any activity that is a crime</li><li>4. My mother's name is:</li></ul>	under the laws of the State of	of California or of the United States.
Her address is:		
Her consent to my emancipation is attached.		
Notice to her should not be required because (state reas	ons):	
5. My father's name is: His address is:		
His consent to my emancipation is attached.		
Notice to him should not be required because (state reasons)	sons):	
6. I have a legal guardian.  My guardian's name is:		
My guardian's address is:		
My guardian's consent to my emancipation is atta		
Notice to my guardian should not be required because of the control of the contro	ause (state reasons):	
7 Other person entitled to notice.  This person's name is:		
This person's address is:		
This person's consent to my emancipation is attach		
Notice to this person should not be required becau  8. I am a dependent child probation] ward of	se (state reasons): of the Juvenile Court of	County.
Case number (if known):	or the daverme court of	County.
	(name):	
His / her consent is attached.		
I declare under penalty of perjury that the foregoing is true and corr (place): , California,	ect and that this declaration is	s executed at
on (data):		
on (date):	(S	IGNATURE OF PETITIONER)

Form Adopted for Mandatory Use Judicial Council of California MC-300 [Rev. January 1,2008]

PETITION FOR DECLARATION OF EMANCIPATION OF MINOR, ORDER PRESCRIBING NOTICE, DECLARATION OF EMANCIPATION, AND ORDER DENYING PETITION

Page 1 of 2
Family Code § 7000, et seq.
www.courtinfo.ca.gov.

					MC-300
NAME OF MINOR				CASE NUMBER:	
b. The addresses of  (1) Fathe  (2) Mothe  (3) Legal	d to notice of this proce the following are unknor	own.	nsented to the emancip	pation and waived notice of he	aring.
b. is required to the f (1) Father (2) Mother (3) Legal (	e declaration of emand ollowing persons:	(4) (5) (5)	Juvenile Court of	vorker or probation officer in <i>(dept):</i>	County
Date:		_			
			CIPATION WITHOUT H	JDGE OF THE SUPERIOR COURT)	
The court finds that the petition by the court. Emancipation is no THE PETITION IS GRANTE FAMILY CODE SECTION 7	er is a person describe of contrary to the best in D. THE PETITIONER	d by Family Co nterests of the	child.		
Date:		_			
			(,	JUDGE OF THE SUPERIOR COURT)	
The court finds that the petition THE PETITION IS DENIED	on its face fails to esta	-	ING PETITION etitioner is a person de	scribed by Family Code section	on 7120.
Date:		_	(JU	JDGE OF THE SUPERIOR COURT)	
[SEAL]	I certify that	-	CLERK'S CERTIFICATION  Declaration of Emance  a true and correct cop		office.
	Date:		Clerk, by		, Deputy

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<del>-</del>				
ATTORNEY FOR (Name):				
SUPERIOR COURT OF CALIFORNIA, CO	OUNTY OF			
STREET ADDRESS:				
MAILING ADDRESS:				
CITY AND ZIP CODE:				
BRANCH NAME:				
IN THE MATTER OF <i>(NAME)</i> :				
		Detitioner e miner		
		Petitioner, a minor	CASE NUMBER:	
NOTICE OF HEARING —	<b>EMANCIPATION OF</b>	MINOR	CASE NOWIBER.	
CONSENT AND	WAIVER OF NOTION	CE		
1. The minor (name):			has filed a	petition asking the court
to declare the minor an <b>EMANCIPATED</b>	MINOR. If the petition i	s granted, the minor wil		-
for purposes set forth in California Family	Code section 7050.			
2. A HEARING for the court to consider the	petition will be held:			
on (date):	at (time):	in Dept.:	Room:	
TO DADENTO				
TO PARENTS:		DDECENTATIVE OD I	FUE DICTRICT ATT	ODNEY MAY LATED
IF THE PETITION IS GRANTED, THE MIN				
PETITION THE COURT TO RESCIND THE		MANCIPATION AND	TOU MAY BE LIABL	E FOR SUPPORT AND
MEDICAL COVERAGE FOR THE MINOR.  Date:				
Date.		<b>k</b>		
(TYPE OR PRINT NAME)			PETITIONER	CLERK
	CONSENT AND W	AIVER OF NOTICE		
The undersigned give up the right to notice	of a hearing on the Peti	tion for Declaration of E	mancipation, and co	nsent to a declaration of
emancipation without a hearing.				
a. Mother	. Signature:		Dated:	
Address:				
Telephone number:	0:		Datada	
b. Father	. Signature:		Dated:	
Address:				
Telephone number:	0:		D. C. I	
c. Legal guardian	. Signature:		Dated:	
Address:				
Telephone number:				
d. Social worker	Ciamantuma.		Datad	
	. Signature:		Dated:	
Address:				
Telephone number:				
e. District attorney	Signatura		Datad	
	. Signature:		Dated:	
	. Signature:		Dated:	
Telephone number:	. Signature:		Dated:	

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ATTORNEY FOR (Name):		
SUPERIOR COURT OF CALIFORNIA, COUNTY OF		1
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		_
IN THE MATTER OF (NAME):		
	Petitioner, a minor	
EMANCIPATION OF MINOR		CASE NUMBER:
INCOME AND EXPENSE DECLARATION	J	
INCOME AND EXI ENCE DECEMBATION		
1. My name and address are:		
My telephone number is:		
I have been living at this address since:		
I live there with (name and relationship of all persons, including chi	ldren):	
2. My date of birth is:		
3. a I am attending school (name of school and grade):		
b. I am not attending school. The highest year of education	I have completed is:	
4. My occupation is:		
4. My Goodpation 13.		
E. a. Lam ampleyed My place of ampleyment is (name and as	ldrooo).	
5. a I am employed. My place of employment is (name and ac	iaress):	
Latestad words the second (data):		
I started work there on (date):	(atarting month and	. اس
b. I am not employed at the present time. I last worked from		
to (ending month end year):	, ,	hly earnings were: \$
6. a. I am not receiving welfare or AFDC and I do not intend to		OC.
b. I am receiving welfare or AFDC. Monthly amount received	I: \$	
c. I have applied for welfare or AFDC.		
d. I intend to apply for welfare or AFDC.		

11	N THE MATTER OF <i>(NAME):</i>	CASE NUM	/IBER:
7.	The average of my gross monthly earnings is:  a. Salary and wages, including bonuses and overtime	\$	<u>mount</u>
	<ul> <li>b. Money received from parents or other adults assisting me (name and relationship):</li> <li>c. Other (specify source and amount):</li> </ul>	\$	
8.	I have the following assets:  a. Cash  b. Checking account  c. Savings account  d. Stocks, bonds  e. Vehicle (year, make, model)  f. Other (specify):	\$ \$ \$ \$	
9.	My monthly expenses are:  a. Rent or Mortgage  b. Food  c. Clothing  d. Phone and utilities  e. Vehicle  (1) Loan payments  (2) Maintenance		Amount  \$ \$ \$ \$ \$ \$ \$
	declare under penalty of perjury that the foregoing is true and correct.  ate:		
	(TYPE OR PRINT NAME) (SIGN.	NATURE OF F	PETITIONER)

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MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME: IN THE MATTER OF (NAME):			
IN THE MATTER OF (NAME).			
		Petitioner, a minor	
			CASE NUMBER:
DECLARATION OF E	MANCIPATION OF M	INOR AFTER HEARING	
1. This proceeding came on fo	or hooring as follows:		
a. Date:	Time:	Dept.:	Div.: Room:
b. Judge <i>(name)</i> :		2 op	
c. Present in court:			
Petitioner		Attorney (name):	
Father	ļ	Attorney (name):	
Mother	<u> </u>	Attorney (name):	
Probation officer (			
Social worker (nai			
District attorney (r	-		
	relationship to minor):		
2. THE COURT FINDS THAT			
	as prescribed by the cou		
	given to the petitioner's		that a court may rescind the declaration of
		e liable for the minor's support and m	nedical coverage.
<ul><li>c. The petitioner is a persor</li><li>d. Emancipation is not cont</li></ul>	-		
			ED FOR THE PURPOSES SET FORTH IN
FAMILY CODE SECTION 7		DEGLARED TO BE EMARKS AT	ED FOR THE FOR OCCUPANT
Date:			HIDOS OF THE CURSING COURT
			JUDGE OF THE SUPERIOR COURT)
	1		
[SEAL]			
		CLERK'S CERTIFI	CATE
	I certify that the fore	going is a true and correct copy of the	he original on file in my office.
	Date:	Clark by	Danish
	Dale.	Clerk, by	, Deputy

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SUPERIOR COURT OF CALIFORNIA, COUNTY OF		
STREET ADDRESS:		
MAILING ADDRESS:		
CITY AND ZIP CODE:		
BRANCH NAME:		
IN THE MATTER OF <i>(NAME)</i> :		
	Petitioner, a minor	
	•	CASE NUMBER:
EMANCIPATED MINOR'S APPLICATION TO C. DEPARTMENT OF MOTOR VEHICLE		
	eclared to be emancipate	ed for the purposes set forth in Family Code
(DATE OF EMANCIPATION ORDER)		
section 7050 et seq. by order of the Honorable		,
	(NAME OF JUDIO	CIAL OFFICER)
Judge of the Superior Court of	County.	
(NAME OF COUNTY)		
apply to the California Department of Motor Vehicles for entry of information of the fact of my emancipation on any identification ca	, ,	•
of inclusion of the fact of my emandpation on any identification ca	ia issued to frie by trie b	repartment.
I have attached a certified copy of the Declaration of Emancipation		
Date:		
<del></del> -	(SIG	NATURE OF EMANCIPATED MINOR)