ATTORNEY OR PARTY WITHOUT ATTORNE	EY STA	TE BAR NUMBER:	FOR COURT USE ONLY
NAME:			
FIRM NAME:			
STREET ADDRESS:			
CITY:	STAT		
TELEPHONE NO.:	FAX N	10.:	
E-MAIL ADDRESS: ATTORNEY FOR (name):			
SUPERIOR COURT OF CALIFOR	NIA COUNTY OF		
STREET ADDRESS:	INIA, COONTT OF		
MAILING ADDRESS:			
CITY AND ZIP CODE:			
BRANCH NAME:			
IN THE MATTER OF (name):			
Petitioner, a minor			
DECLARATION OF EMANCIPATION OF MINOR AFTER HEARING			CASE NUMBER:
This proceeding came on fo	r hearing as follows:		
a. Date:	Time:	Dept.:	Room:
b. Judge (name):			
<u> </u>			
c. Present in court:  Petitioner		Attornov (nama):	
		Attorney (name):	
Father		Attorney (name):	
Mother		Attorney (name):	
Probation officer (name):			
Social worker (name):			
County counsel (name):			
District attorney (name):			
Other (name and relationship to minor):			
2. THE COURT FINDS THAT:			
a. Notice was given as prescribed by the court.			
b. Warning has been given to the petitioner's Mother Father that a court may rescind the declaration of emancipation and the parents may become liable for the minor's support and medical coverage.			
c. The petitioner is a person described by Family Code section 7120.			
d. Emancipation is not contrary to the best interests of the petitioner.			
3. THE PETITION IS GRANTE FAMILY CODE SECTION 7		S DECLARED TO BE EMANCIPA	TED FOR THE PURPOSES SET FORTH IN
		•	
Date:		<u> </u>	(JUDGE OF THE SUPERIOR COURT)
	1		
CLERK'S CERTIFICATE  I certify that the foregoing is a true and correct copy of the original on file in r			
	Date:	Clerk, by	, Deputy
1			Page 1 of 1

Form Adopted for Mandatory Use Judicial Council of California EM-130 [Rev. September 1, 2018]