

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	<i>FOR COURT USE ONLY</i>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF ORANGE COSTA MESA JUSTICE COMPLEX 3390 Harbor Blvd. Costa Mesa, CA 92626-1554	
IN THE MATTER OF:	
ELDERCARING COORDINATOR REQUEST FOR STATUS CONFERENCE	CASE NUMBER:

The undersigned Eldercaring Coordinator requests a status conference in this case: (*choose all that apply*)

1. To request direction from the court concerning: _____

2. To request resolution by the court regarding: _____

3. To report adherence of _____ to the Order of
 Referral to Eldercaring Coordinator, orders for psychological evaluation, counseling ordered by the court or
 recommended by a health care provider, or for substance abuse testing or treatment.
4. To report that the case is no longer appropriate for Eldercaring coordination.
5. To report that the undersigned Eldercaring Coordinator is not qualified to address or resolve certain
 issues in this case and a more qualified successor Eldercaring Coordinator should be appointed.
6. The undersigned Eldercaring Coordinator is unable or unwilling to continue to serve and a successor
 Eldercaring Coordinator should be appointed.

WHEREFORE, the undersigned Eldercaring Coordinator requests that a Status Conference be set by the Court.

_____ DATE

_____ PRINTED NAME

_____ SIGNATURE OF ELDERCARING COORDINATOR