

SUPERIOR COURT OF THE STATE OF CALIFORNIA, COUNTY OF NEVADA

PLAINTIFF/PETITIONER:	FOR COURT USE ONLY
DEFENDANT/RESPONDENT:	
OTHER PARENT:	
REQUEST FOR FAMILY LAW TELEPHONE APPEARANCE AND ORDER THEREON	
DATE: _____ DEPARTMENT: _____ CALL-IN TIME: _____	CASE NUMBER:

I Petitioner Petitioner's Attorney Respondent Respondent's Attorney hereby request to appear by telephone at the hearing in the above-entitled matter set on the date above specified due to: _____

I notified all other parties on: _____

Date	Time	Method
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Other party does / does not object to my appearance by phone.

I agree that it is my responsibility to timely file with the Court, and timely serve, all necessary and appropriate pleadings and documents on all other parties including a current Income and Expense Declaration if financial relief is sought by either party.

I further agree that establishing and completing communication with the court through vCourt is my responsibility.

ADVISEMENT REGARDING TELEPHONE APPEARANCE

1. I freely give up my right to personally appear at this hearing and agree to be duly sworn to tell the truth over the telephone upon request by the Court.
2. I will provide my driver's license number, social security number, or other information to verify my identity when asked by the Court staff or conference call provider.
3. I understand the Court may not have videoconferencing capabilities. I understand and assume the risk that I may not be able to personally see or inspect the pleadings, documents, or evidence; the witnesses' facial reactions, demeanors, or hand gestures; or other visual or nonverbal aspects of the hearing.
4. I understand if I do not make the proper arrangements for a telephone appearance as set out in local rules or in directions provided by the Court, the matter may proceed without my personal or telephone appearance and the Court may decide my case based on the documents I filed for this hearing.
5. I understand that the Court may decide at any time to require my personal appearance and continue my hearing due to delay, questions about credibility, disruption, noise, misconduct, a communication problem, a technical problem and/or other issue. I assume the risks of cost, time, delay, repeated telephone calls, technical failure, a wrong number, and other problems that could arise out of this telephone appearance. I understand that if problems occur, the matter may proceed without my personal or telephone appearance and the Court may decide my case based on the documents I filed for this hearing.
6. I understand if this request is granted, I am required to make arrangements through vCourt for the telephone appearance at my own expense, and, if I have no or low income, I may apply to the Court for a fee waiver of the conference call fee charged by vCourt.
7. I understand I can check with the local court clerk or local rules of court regarding any additional local procedures that may be available to protect my confidentiality.

This case may be referred to a court commissioner for hearing. By law, court commissioners do not have the authority to issue final orders and judgments in contested cases unless they are acting as temporary judges. By signing the enclosed LOCAL FL17 form, you are agreeing this Court's Commissioner may act as a Judge Pro Tem for all purposes in your case.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date: _____ Print Name: _____ Signature: _____

ORDER

Order on request for telephonic appearance is entered as follows: GOOD CAUSE APPEARING, THE
 REQUEST IS GRANTED – Requesting party shall make arrangements to appear at the hearing by CourtCall.
 REQUEST IS DENIED.

DATED _____

 JUDICIAL OFFICER, SUPERIOR COURT OF NEVADA COUNTY

PETITIONER/PLAINTIFF: RESPONDENT/DEFENDANT: OTHER PARENT:	CASE NUMBER:
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PROOF OF SERVICE

1. At the time of service I was at least 18 years of age and not a party to the legal action.
2. My residence or business address is (specify):

3. I served a copy of the foregoing Request for Telephone Appearance and all attachments as follows (check a, b, or c for each person served):
 - a. **Personal delivery.** I personally delivered a copy and all attachments as follows:
 - (1) Name of party or attorney served:
 - (a) Address where delivered:

 - (b) Date delivered:

 - (c) Time delivered:

 - (2) Name of party or attorney served:
 - (a) Address where delivered:

 - (b) Date mailed:

 - (c) Place of mailing (city and state).

 - b. **Mail.** I am a resident of or employed in the county where the mailing occurred.
 - (1) I enclosed a copy in an envelope and
 - (a) deposited the sealed envelope with the United States Postal Service with the postage fully prepaid.

 - (b) placed the envelope for collection and mailing on the date and at the place shown below, following ordinary business practices. I am readily familiar with this business's practice for collecting and processing correspondence for mailing. On the same day that correspondence is placed for collection and mailing, it is deposited in the ordinary course of business with the United States Postal Service in a sealed envelope with postage fully prepaid.

 - c. **Other (specify):**
 - Additional page is attached.

I declare under penalty of perjury under the laws of the State of California that the foregoing and all attachments are true and correct.

Date:

_____ (TYPE OR PRINT NAME)

_____ (SIGNATURE OF PERSON WHO SERVED REQUEST)