

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar number, and address)  Telephone No.: _____ Fax No. : _____ ATTORNEY FOR (NAME): _____	<b>FOR COURT USE ONLY</b>
SUPERIOR COURT OF CALIFORNIA, COUNTY OF GLENN 526 West Sycamore Street Willows, CA 95988	
PLAINTIFF/PETITIONER:  DEFENDANT/RESPONDENT:	
<b>REQUEST FOR REMOTE APPEARANCE</b>	Case No.: _____

1. I am: (a)  attorney for  Petitioner/Plaintiff or  Respondent/Defendant  
 (b)  self-represented petitioner or  self-represented respondent  
 (c)  other (explain): \_\_\_\_\_
2. I ask the court to allow  me  \_\_\_\_\_ to appear remotely on  
 (date) \_\_\_\_\_ (time) \_\_\_\_\_ in Department \_\_\_\_\_ of the above-named court.
3. I would like the court to consider the following information in making its decision whether to allow a remote appearance (check all that apply). (Note: The court can still deny your request, even though boxes are checked.)
- a.  I live or work outside the state of California in (specify location): \_\_\_\_\_.
- b.  I live in \_\_\_\_\_ County in California, which is \_\_\_\_\_ miles from the above courthouse where the hearing is set.
- c.  I am disabled.
- d.  I am asking not to appear personally because of domestic violence.
- e.  I will be incarcerated or confined in (specify: \_\_\_\_\_ prison, jail, or other institution at the time of the hearing.
- f.  Other (specify) \_\_\_\_\_
4. (a)  I have submitted this request at least 5 days prior to the hearing.

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

*For Court Use Only – Do not write below this line*

**Request Granted:**

**Request Denied:**

**Date:** \_\_\_\_\_

\_\_\_\_\_  
**Judicial Officer**