APPEAL FROM AN ADMINISTRATIVE AGENCY PRAECIPE SAMPLE

IN THE SUPERIOR COURT OF THE STATE OF DELAWARE

	PRAECIPE
Your Name v. Name of Administrative Agency)) Civil Action No)
Please issue <u>Citation on Appeal</u>	
Name of AgencyAddress	
	Appellant Address Phone Number
To: Prothonotary	

APPEAL FROM AN ADMINISTRATIVE AGENCY IN THE SUPERIOR COURT OF THE STATE OF DELAWARE

Your Name)
) C.A. No
v.)
) CITATION ON APPEAL FROM
Name of Against) THE DECISION OF:
Name of Agency (i.e.: State Human Relations Board)) Name of Agency
(i.e., State Trainan Relations Board)) Dated :
	(Date of decision)
THE STATE OF DELAWARE,	
TO THE SHERIFF OF(COUNTY:
YOU ARE COMMANDED:	
To cite NAME OF AGENCY (i.e.: S	tate Human Relations Board) so that, within 20 days
after service hereof upon the Custodian of its	s records, exclusive of the day of service, the
Custodian shall send to this Court a certified	copy of the record of the proceedings below,
including a typewritten copy of the evidence	(unless all parties having an interest in the outcome
of the appeal shall file with the NAME OF A	AGENCY (i.e.: State Human Relations Board) within
10 days from the filing of the Notice of Appe	eal, a written stipulation that the evidence may be
omitted as part of the record, in which case the	he stipulation shall be included as part of the
record), together with this citation.	
Dated:	
	Prothonotary
	Per Deputy