 The Family Court of the State of Delaware

In and For  New Castle County  Kent County  Sussex County

**REQUEST TO PARTICIPATE REMOTELY**

*Petitioner v. Respondent/Defendant*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name & Telephone# |  | Name & Telephone# |  | File Number |
|  |  |  |  |  |
| Attorney Name & Telephone# |  | Attorney Name & Telephone# |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
| *2nd Petitioner (if any)* |  | *2nd Respondent/Defendant (if any)* |  | Case Number |
| Name & Telephone# |  | Name & Telephone# |  |  |
|  |  |  |  |  |
| Attorney Name & Telephone# |  | Attorney Name & Telephone# |  |  |
|  |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Date/Time scheduled: |  | | | | |
| My address is: |  | | | | |
| My email address is: |  | | | My Phone # is: |  |
| I am a party/an attorney | | I am a witness | (Check One) | | | |

**Absent extenuating circumstances, this request must be filed fourteen (14) days before the hearing date.**

Although my hearing requires an in-person appearance per the Court Notice I received,

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | I am requesting to participate remotely. | | | | |
|  | |  | | | | |
|  | I am requesting that my witness, | |  | , be permitted to participate remotely. | | |
|  | | Name of Witness |  | | |
| Explain why circumstances require remote participation: | | | | | |
|  | |  | | | | |
|  | |  | | | | |
|  | |  | | | | |
|  | |  | | | | |

**If you are a party, you must fill out the following unless you have an active Protection From Abuse (PFA) order or are filing this request in a PFA case.**

I have contacted the opposing counsel or, if unrepresented, the opposing party regarding this request to appear remotely and the following is his or her position:

|  |
| --- |
|  |
|  |
|  |

|  |  |  |  |
| --- | --- | --- | --- |
| SWORN TO AND SUBSCRIBED before me this date, |  | | |
|  | | | |
|  | |  |  |
|  | |  | Movant/Attorney Print Name |
|  | |  |  |
| Clerk of Court/ Notary Public | |  | Movant/Attorney |

The request is hereby  GRANTED  DENIED and the parties have been notified.

|  |  |
| --- | --- |
| Notes: | |
|  |
|  |
|  |

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Date |  | Judge/Commissioner |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| cc: | Petitioner | | Petitioner’s Atty | | | Def/Respondent | |  | Resp. Atty/Def. Atty/PD  ODS | | | DOJ |
|  | | DCSS | | DFS | Other: | |  | | | Other: |  | | |

## **AFFIDAVIT OF MAILING**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| I, the Movant, affirm that a true and correct copy of this Request was placed in the U.S. Mail on this date | | | | |
|  | | , and sent to the other party or attorney at the address listed on the petition/complaint, | | |
| being |  | | , first class postage pre-paid. |
|  | | | |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| SWORN TO AND SUBSCRIBED before me this date, |  | | |  |
|  | |  |  | | |
|  | |  |  | | |
| Clerk of Court/ Notary Public | |  | Movant/Attorney | | |