

- Confirmation by Applicant of Scheduled JDR Hearing**  
 **Reply by Respondent**

Print Name \_\_\_\_\_

<b>File Name</b>	
<b>Docket #</b>	
<b>Originating Court</b>	
<b>Date / Time</b>	
<b>Location</b>	

<b>Purpose of Hearing and Parties' Position</b>	<p>Attach a statement (preferably typed) of not more than three (3) pages along with any relevant documents outlining the purpose of the Hearing and an overview of your position.  A suggested outline would include:</p> <ol style="list-style-type: none"> <li>1) Relevant background information</li> <li>2) Current situation</li> <li>3) The issues</li> <li>4) Each parties' position</li> <li>5) Documentation to be provided should/could include: <ul style="list-style-type: none"> <li>• Court Circumstances</li> <li>• Home Study Reports</li> <li>• Expert Reports</li> <li>• Alcohol and Drug Test Results</li> <li>• Other (please specify)</li> </ul> </li> <li>6) Also indicate documentation to be provided prior to scheduled JDR.</li> </ol> <p>ALL material <u>must</u> be provided at least 5 working days prior to JDR Hearing.</p>
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<b>PARTIES</b>			
1) Applicant means the party who commenced the claim			
2) Provide current mailing address if it is not indicated in file court documents			
Applicant(s)	Counsel	Phone / Cell	Fax
Respondent(s)	Counsel	Phone / Cell	Fax

<b>CHILDREN</b>				
Name	Birthdate	Counsel	Phone / Cell	Fax

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant / Respondent or Counsel

\_\_\_\_\_  
Print Name of Applicant / Respondent or Counsel