

ATTORNEY OR PARTY WITHOUT ATTORNEY STATE BAR NUMBER:  NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: EMAIL ADDRESS: ATTORNEY FOR (name):	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
CHILD'S NAME:	
<b>REQUEST TO COMPEL PHYSICAL PRESENCE—JUVENILE DEPENDENCY</b>	
CASE NUMBER:	

**INSTRUCTIONS**

Any party to a juvenile dependency case or the party's attorney may ask the court in writing to compel the physical presence of a witness or party at a proceeding in the case, including by (1) completing this form, (2) filing the completed form with the juvenile court, and (3) serving a copy of the completed form on all other parties in any manner authorized by law that is reasonably calculated to ensure they all receive it no later than two court days before the proceeding.

The court *must* require a witness to be physically present if it determines that one or more parties have not given, or have withdrawn, consent to the witness's remote appearance. The court *may* require a witness or a party to be physically present if it finds that the available technology is inadequate to allow the effective management or resolution of the proceeding, that an in-person appearance will materially assist in the determination of the proceeding or the effective management or resolution of the case, or that the confidentiality of the proceeding cannot be preserved using available remote technology.

1. The proceeding is a *(type of hearing, if known)*:  
  
 on *(date)*: \_\_\_\_\_ at *(time)*: \_\_\_\_\_ in *(department)*: \_\_\_\_\_  
 before *(name of judicial officer, if known)*: \_\_\_\_\_
2. Party filing this request:
  - a.  Child or nonminor dependent
  - b.  Parent, legal guardian, or Indian custodian
  - c.  Social worker/child welfare agency
3. Party or witness whose appearance in person is requested:
  - a.  Child or nonminor dependent *(name)*: \_\_\_\_\_
  - b.  Parent, legal guardian, or Indian custodian *(name)*: \_\_\_\_\_
  - c.  Social worker *(name)*: \_\_\_\_\_
  - d.  Nonparty witness *(name)*: \_\_\_\_\_
4.  The person named in item 3 has been called as a witness in the proceeding. I do not consent to their remote appearance.
5. I request that the court compel the party or witness indicated in item 3 to be physically present for the following reasons *(explain)*:

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

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

\_\_\_\_\_ \_\_\_\_\_

(TYPE OR PRINT NAME) (SIGNATURE)