(Name of Person Requesting to Attend Court Hearing or Attorney Filing Request) Name: State Bar No.	FOR COURT USE ONLY
Address:	
Address.	
Phone: Email:	
SUPERIOR COURT OF CALIFORNIA, COUNTY OF STANISLAUS	
800 11 <sup>th</sup> Street, Modesto, CA 95354	
Plaintiff/Petitioner:	
Defendant/Respondent:	
Defendant Respondent.	~
REQUEST TO ATTEND COURT HEARING	Case Number
You do <u>not</u> need to complete this form to attend a court hearing if you are an att a criminal case), or a witness served with a subpoena which requires you to a need to complete this form if you have been summoned	ppear at the hearing. You also do <u>not</u>
This form may <u>not</u> be used to request a remote appearance.	
Submit this form at least two (2) business days prior to	o the hearing.
I request permission I request permission on behalf of:	to attend a hearing
n the above-referenced matter scheduled as follows:	
Date: Time: Dept: .	
Reason for Request:	
I understand that the Court may limit the number of persons allowed in the courthou may be granted to attorneys, parties and witnesses. I also understand that even if thi court proceeding may be withdrawn if the judge determines it necessary to maintain	s request is granted, permission to attend
Dated:	
Signatu	are of Requester or Attorney
The Request to Attend Court Hearing is:	
Granted: ** Approval is subject to courtroom occupancy limits.	Denied:
Deted	
Dated:Judge	e of the Superior Court

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