

**FAMILY COURT SERVICES - ROOM 2150
501 WEST ADAMS STREET, JACKSONVILLE, FL 32202
(904) 255-1060**

**CHECKLIST FOR:
REQUEST TO APPEAR BY ZOOM**

Use this form if you have a hearing where you are unable to appear in-person and wish to appear virtually.

Filing this motion does not guarantee your request to appear virtually. An order granting or denying your request will be entered. If your motion is granted, you will receive instructions on appearing virtually.

- Local Form (attached)
 - Request to Appear by Zoom

INSTRUCTIONS:

1. **Fully complete** the provided form.
2. Make **two (2) copies** of the form.
3. File your completed **original motion with the Clerk of Courts**
 - **Family Law Clerk of Court
Room 1191
501 West Adams Street
Jacksonville, FL 32202**
4. **NEXT** the (2) copies you made...
 - (1) COPY - YOU KEEP FOR YOURSELF
 - (1) COPY – Delivered to the other party
 - Send an email to your Case Manager with the attached motion.
Add to Subject line: Zoom Request

IN THE CIRCUIT COURT FOR THE FOURTH JUDICIAL CIRCUIT
IN AND FOR DUVAL COUNTY, FLORIDA

CASE NO.: _____
DIVISION: _____

_____,
Petitioner,

And

_____,
Respondent,

REQUEST TO APPEAR BY ZOOM

The above-referenced case is scheduled for a hearing on (*date*) _____
at (*time*) _____ on the matter of _____
The () Petitioner () Respondent is unable to appear in person because _____

And requests permission from the Court to participate in the scheduled hearing by zoom.

CERTIFICATE OF SERVICE

I certify that a copy of this document was () mailed () e-mailed () hand-delivered to the
person(s) listed below on {*date*} _____.

Other party or his/her attorney:

Name: _____

Address: _____

City, State, Zip: _____

E-mail: _____

**I understand that I am swearing or affirming under oath to the truthfulness of the claims made in
this answer and that the punishment for knowingly making a false statement includes fines and/or
imprisonment.**

Date: _____

Signature of Party

Address: _____

E-Mail: _____

Tel. No.: _____