

**ELECTRONIC TESTIMONY APPLICATION
AND WAIVER OF PERSONAL APPEARANCE**

**FAMILY COURT OF THE STATE OF NEW YORK
COUNTY OF CHENANGO**

Petitioner

DOCKET NO. _____

-against-

Respondent

NAME: _____	TELEPHONE: (Home) () _____
ADDRESS: _____	(Work) () _____
_____	(Fax) () _____

COMPLETE APPLICABLE SECTIONS

On _____, I filed the above-captioned petition in the Family Court, Chenango County, State of New York. The hearing is scheduled to take place on _____. (or)

On _____, I received a summons to appear in Family Court, Chenango County, State of New York on _____.

I request that I be permitted to testify or to give my deposition by telephone.

I am making this request for the following reasons _____

I understand that prior to my application being granted, it is my responsibility to attempt to arrange with the Support Enforcement Agency in my County or the Court responsible for support enforcement in my County to assist in scheduling my testimony or deposition with the Court. I request that I be permitted to testify or be deposed from the following location:

The Support Enforcement Agency in my County is (name, address and telephone number)

The Court in my County is (name, address and telephone number) _____

I understand that I must confirm final arrangements for testifying by electronic means with the Court by calling telephone number (607) 337-1824. I further understand that the Court will send me written confirmation of the decision regarding my application, time permitting.

I understand that I have the right to legal counsel to discuss this matter. By this application, I am submitting to the jurisdiction of this Court and I am consenting that the Court hear and determine this matter without my personal appearance.

I understand that I have the right to be present at any and all appearances, including any hearing scheduled by the Court. I understand that if I fail to appear on any of the scheduled dates, either in person or by telephone, this Court may hear the matter in my absence or may issue a WARRANT for my arrest. If I am the Petitioner, I understand that if I fail to appear, either in person or by telephone, the Court may DISMISS my petition.

I understand that I must forward to the Court, prior to my scheduled appearance, the completed financial documentation as requested in the attached summons.

Dated: _____

Sworn to before me this _____ day of _____, 200__

(Deputy) Clerk of the Court
Notary Public

Applicant
FORWARD COMPLETED APPLICATION
TO: Chenango County Family Court
County Office Building
5 Court Street
Norwich, NY 13815
Phone: (607)337-1824 Fax: (607)337-1835

TO BE FILED OUT BY FAMILY COURT:

Please be advised that your Electronic Testimony Application is:
_____ **GRANTED**. Please telephone the Court on _____ time _____
At (607) 337-1824; and be prepared to present your testimony.

_____ **DENIED** for the following reason: _____

If denied, you must personally appear at this Court on the scheduled date and time for the hearing.