

**IN THE SUPERIOR COURT OF FORSYTH COUNTY
STATE OF GEORGIA**

_____,
Plaintiff.

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_____,
Defendant.

Civil Action No. _____

Judge Assigned: _____

REQUEST FOR CIVIL NON-JURY HEARING

Please complete the attached form and return to:

Forsyth County Superior Court Clerk
100 Courthouse Square, Suite 10
Cumming, GA 30040
Attention: Civil Division

- All information requested **MUST** be provided or you will not be assigned a court date.
- Please include a self-addressed stamped envelope so a copy of the completed form with a court date assigned may be returned to you.
- You are responsible for notifying all other necessary parties and attorneys of the court date assigned. **You must complete and file with the Clerk's office a certificate of service representing that you have mailed a copy of the complete request for hearing form to all necessary parties or attorneys.**

Name of Attorney or Party requesting hearing: _____

Name(s) of opposing counsel: _____

Guardian Ad Litem (if applicable): _____

Purpose of hearing (Temporary Hearing, Final Hearing, Name of Motion(s) to be heard):

Does the case involve contested custody? _____ YES _____ NO

If yes, has the case been to mediation? _____ YES _____ NO

(If the case involves contested custody and mediation has not yet been requested and completed, no final hearing date will be assigned. Please contact the Judge's Office for a mediation referral request form or for directions on obtaining an emergency hearing.)

****Will the hearing take longer than 1 ½ hours total for both parties to complete? ___ Yes ___ No**

Estimated time: _____ Plaintiff _____ Defendant

Note: Hearings for 1 ½ hours or less will be scheduled by the Clerk's Office on the appropriate day. If the hearing will take longer than 1 ½ hours, then your request will be forwarded to the Judge's Office to be set on a bench trial calendar. Your matter may be required to be continued to a bench trial calendar set by the Judge's Office if your hearing exceeds 1 ½ hours on a date scheduled by the Clerk's Office. Your hearing date and time will be indicated below.

RULE NISI

A hearing concerning the above referenced matter having been requested, the parties are hereby ordered to appear on the _____ day of _____, 20____ at _____ O'clock __. M. in Courtroom ___ of the Forsyth County Courthouse. This is a ___ day calendar including the following dates: _____.

Calendar call will be conducted at 9:00 a.m. on the date assigned and priorities will be set at that time. Appearance is mandatory at calendar call in order to remain on the calendar.

This _____ day of _____, 20_____.

Deputy Clerk or Calendar Clerk

Date returned to requesting party: ___ / ___ / ___

IN THE SUPERIOR COURT OF FORSYTH COUNTY
STATE OF GEORGIA

_____,
Plaintiff.

v.

_____,
Defendant.

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*
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*

Civil Action No _____

CERTIFICATE OF SERVICE

This is to certify that I have this day served the parties in the foregoing matter with a copy of the attached hearing request form by depositing said copy in the United States Mail in a properly addressed envelope with adequate postage thereon as follows:

Name and Address of Opposing Attorney/Party:

This ____ day of _____, 20__.

Signature of party requesting hearing