

NORTH CAROLINA

FORSYTH COUNTY

IN THE GENERAL COURT OF JUSTICE

DISTRICT COURT DIVISION

FILE NO. _____

Plaintiff,
v.

Defendant.

**DISTRICT COURT
CALENDAR REQUEST & NOTICE OF HEARING**

NOTE IF CONTINUANCE REQUEST _____ (NO FEE)

CHAMBERS HEARINGS

CHILD CUSTODY MEDIATION

PARTIES MUST COMPLETE CHILD CUSTODY MEDIATION BEFORE CUSTODY HEARING OR CHILD CUSTODY CONTEMPT MATTER CAN BE SET UNLESS EXEMPT BY THE JUDGE:

Have the parties completed mandatory child custody mediation? YES [] NO [].

Date mediation was completed: _____

If mediation not completed:

Date mediation orientation is scheduled: _____

Date mediation is scheduled: _____

Have the parties been exempted from mandatory child custody mediation? YES [] NO []

WEEK REQUESTING: _____

COURTROOM REQUESTING: _____

CALENDAR CALL DATE: _____

APPROXIMATE TIME NEEDED FOR HEARING: _____

CALENDAR CALL IS HELD ON THE TUESDAY PRIOR TO WEEK REQUESTED VIA WEBEX

Check each line that applies to the scheduled motion(s):

CUSTODY	[]	TEMPORARY CUSTODY	[]	VISITATION	[]
CHILD SUPPORT	[]	FEES	[]		
PSS	[]	ALIMONY	[]	DB & B	[]
CONTEMPT	[]	OTHER	[]	_____	

206: Weeks 2 and 3: Long Chambers

Hearings 206: Week 4: Chambers Hearings

202: Weeks 3, 4, and 4: Chambers Hearings

207: Weeks 1, 3, and 4: Chambers Hearings

207: Week 2: Short Chambers Hearings

	Week One	Week Two	Week Three	Week Four	Week Five (if applicable)
206	<i>Equitable Distribution</i>	Long Chambers Hearing Session	Long Chambers Hearing Session, cont.	Chambers	Chambers
202	<i>General Civil</i>	Chambers	Chambers	Chambers	Chambers
207	Chambers	Short Chambers Hearings	Chambers	Chambers	Chambers

Pursuant to Local Rules: Short Hearings shall take two hours or less to be completed, with equal time allocated to each party. Parent Coordinator Appointment Conferences shall be set during the short hearings chambers week.

Pursuant to Local Rules: Long Chambers Hearings shall be for cases that will take two full days or longer to be heard. Pre-Trial Conferences for all matters set in the Long Hearings Chambers Session shall be completed no later than the first day of the Long Hearings Chambers Session.

NOTE: If an interpreter is necessary for any civil hearing, please complete the form found at <https://www.nccourts.gov/request-for-spoken-foreign-language-court-interpreter> at least one week prior to the hearing.

CERTIFICATE OF SERVICE

This is to certify that the undersigned has this date served this pleading upon all other parties to this cause by (____) depositing a copy enclosed in a post office of official depository under the exclusive care and custody of the United States Postal Service. (____) handing it to the attorney or to the party, leaving it the attorney's office with a partner or employee. (____) sending it to the attorney's office by a confirmed FAX receipt confirmation, (____) sending to the attorney's email address of record with the court or to the party's email with the party's consent to receive service via email attached if not already filed with the court, or (____) having the Sheriff serve the parties.

STATE BAR NUMBER: _____

ATTY'S/PARTY'S NAME: _____

ADDRESS: _____

TELEPHONE NUMBER: _____

EMAIL ADDRESS: _____

PLAINTIFF _____ DEFENDANT _____

DATE OF SERVICE SIGNATURE

I CERTIFY THAT I HAVE NOT ALREADY SCHEDULED THE ABOVE ON

ANOTHER FUTURE DATE: _____ (signature)

LIST BELOW THE NAME AND ADDRESS OF THOSE SERVED:

NAME: _____

STREET ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

FAX NUMBER: _____

PLAINTIFF: _____ DEFENDANT: _____

LIST BELOW THE NAME AND ADDRESS OF THOSE SERVED:

NAME: _____

STREET ADDRESS: _____

CITY/STATE/ZIP: _____

PHONE NUMBER: _____

EMAIL ADDRESS: _____

FAX NUMBER: _____

PLAINTIFF: _____ DEFENDANT: _____