Form UCCJEA-7 (Electronic Testimony Application and Waiver of Physical Presence— UCCJEA) 9/2008

			9/2008
FAMILY COURT OF THE	E STATE OF NEW YORK		
COUNTY OF			
T (1 3 f (1) C D 1'			
In the Matter of a Proceeding			
☐ Custody ☐ Visitation of			
☐ Enforcement ☐ Modifica	_		
of an Order of Custody			
Under the <i>Uniform Child C</i>	nestic Relations Law Art.5-A		
ana Enjorcement Act [Doll)	lesue Relations Law Art.3-A		
	Datitionar		
against	Petitioner,	Docket No	•
-against-	ान	ECTRONIC TESTIMO	
			L PRESENCE- UCCJEA
	***	THE OF THE SIGN	TRESERVED OCCUENT
	Respondent		
	esting permission to testify by		
	m must be submitted IMMED	DIATELY to the Cour	t at [specify address and
fax number of Court]:			
ΔΡΡΙΙΟΔΝΤ'ς ΝΔΜΕ	APPLICA	ANT'S TELEPHONE:	(Home): () -
ADDRESS:1	ATTLICE	(Work): ()	
		FACSIMILE (Fax	- x): ()
		E-MAIL:	·/· ()
1. a. On	, I [check applicable box]:		
	aptioned petition in the (Family	(Other [specify]:) Court.
~		// [/ J	
Cou	ınty, 🗆 State of New York 🗇 C	Other [specify]:	. The hearing is
Cou scheduled t	anty, ☐ State of New York ☐ Co take place on [specify date]:	Other [specify]:	. The hearing is
scheduled t	o take place on [specify date]: _	Other [specify]:	The hearing is _·
scheduled t received [check a	o take place on [specify date]: _applicable box]: ☐ a summons	Other [specify]:s \(\sigma \) a subpoena \(\sigma \) an	The hearing is n Order to Show Cause to
scheduled t received [check a appear in Family Court,	o take place on [specify date]: _ applicable box]: □ a summons County, State of New	Other [specify]:s \(\sigma \) a subpoena \(\sigma \) an	The hearing is n Order to Show Cause to
scheduled to received [check a appear in Family Court, b. This proceeding invo	o take place on [specify date]: _ applicable box]:	Other [specify]: S	The hearing is n Order to Show Cause to]:
scheduled t received [check a appear in Family Court,	o take place on [specify date]: _ applicable box]:	Other [specify]: S	The hearing is n Order to Show Cause to
scheduled to received [check a appear in Family Court, b. This proceeding invo	o take place on [specify date]: _ applicable box]:	Other [specify]: S	The hearing is n Order to Show Cause to]:
scheduled to received [check a appear in Family Court, b. This proceeding invo	o take place on [specify date]: _ applicable box]:	Other [specify]: S	The hearing is n Order to Show Cause to]:
scheduled to received [check a appear in Family Court, b. This proceeding invo	o take place on [specify date]: _ applicable box]:	Other [specify]: S	The hearing is n Order to Show Cause to]:

Specify if address, telephone or other identifying information has been ordered to be kept confidential pursuant to New York State Domestic Relations Law §§76-h(5), 254 or Family Court Act §154-b. If your health or safety or that of your child or children would be put at risk by disclosure of your address or other identifying information, you may apply for an address confidentiality order by submitting General Form GF-21. This form is available online at www.nycourts.gov.

² See note 1.

2. I request that I be permitted to testify or to ☐ telephone ☐ audio-visual mean			-
3. I reside in [specify state or jurisdiction]: ³			
and am making this request for the foll		pecify]:	
			·
4. I understand that prior to my application bettestimony or deposition by telephone, a permitted to testify or be deposed at the ☐ The Court in the jurisdiction of my reincluding area code, of the Court]:	audio-visual or other ne following location	r electronic means. In [check applicable]	I request that I be box]:
☐ My attorney's office [specify the nar	me, address and tel	ephone number, inclu	iding area code]:
		11-1	1.7.
☐ Other location [specify name. address	_	imber, including area because [state reason	
1 am reque	esting this location	because [state reason]	J·
by calling the Court at the number that will be me a written Order telling me whether this app call to confirm. Please transmit this order by first page of this form. 6. I understand that I have the right to discuss	lication has been g [check box]:	ranted or denied and ve-mail ☐ facsimile	what number I should as indicated on the
consenting to the hearing by this Court without	my physical prese	nce.	
7. I understand that I have the right to be pressenteduled by the Court. If I am the Respondendates, either in person or by telephone, audiothis Court may hear the matter in my absence of Petitioner, I understand that if I fail to appear, electronic means approved by this Court, the Court,	t, I understand that visual means or other may issue a WA either in person or	if I fail to appear on a er electronic means a RRANT for my arres by telephone, audio-v	any of the scheduled approved by this Court, it. If I am the
WHEREFORE, I respectfully request t	hat this application	be granted.	
Dated:			
	Respondent	☐ Petitioner	☐ Witness

³ See footnote #1.