

IN THE CIRCUIT COURT OF THE FIRST JUDICIAL CIRCUIT, IN AND FOR SANTA ROSA COUNTY, FLORIDA

IN THE INTEREST OF:

CASE NUMBER: _____

D.O.B.: _____

DIVISION: _____

D.O.B. _____

WAIVER OF PERSONAL APPEARANCE OF FINAL JUDGMENT FOR TEMPORARY LEGAL CUSTODY

I/We, (Full legal name(s)) _____

being sworn, certify that the following information is true:

1. I/We have filed a Verified Petition for Temporary Legal Custody pursuant to Chapter 751, Florida Statutes.
2. I/We am/are qualified to petition for this action for temporary legal custody.
3. The child's name is _____
The child's date of birth is _____
4. The current address of the child is _____
5. The name(s) and address(es) of the child(ren)'s parents are:

Mother

Father

Street Address

Street Address

City, State, Zip

City, State, Zip

6. The child(ren)'s parent(s) have filed a Consent to give Temporary Custody of the child(ren) to me/us or a Default was entered by Court.
7. All of the information stated in the Verified Petition for Temporary Legal Custody is true and accurate.
8. I/We understand that the parent(s) may request that the Court return custody of them at any time.
9. I/We have no information of any custody proceedings pending in a Court of this State or any other State concerning the child(ren) subject to this proceeding.
10. I/We respectfully request that the Court waive the requirement that I/We personally appear or testify before the Court in this matter. **I/We understand that the effect of the waiver is that the Final Judgment will be entered without further evidence or testimony.**
11. I/We respectfully request that a copy of the Final Judgment be mailed to me/us at the address(es) listed below.

I have completely read the Waiver and fully understand the document. I understand that I am swearing or affirming under oath to the truthfulness of the claims made in this request and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

Signature of Petitioner

Printed Name

Address

City, State, Zip

STATE OF FLORIDA
COUNTY OF SANTA ROSA

Sworn to or affirmed and signed before me on _____.

Donald C. Spencer
Clerk of the Circuit Court

By: _____
Deputy Clerk

OR

Notary Public

_____ Personally known

_____ Produced Identification _____