

STATE OF SOUTH CAROLINA)
)
 COUNTY OF CHARLESTON)
 _____)
)
Plaintiff,)
)
 -vs-)
)
 _____)
)
Defendant(s).)
 _____)

IN THE FAMILY COURT
 NINTH JUDICIAL CIRCUIT

CASE No. _____-DR-10-_____

**REQUEST FOR HEARING and
 WAIVER OF IN-PERSON COURT
 APPEARANCE and CONSENT TO VIDEO
 CONFERENCING**

Plaintiff or Plaintiff's Attorney: _____

Email: _____ Telephone: _____

Defendant or Defendant's Attorney: _____

Email: _____ Telephone: _____

Guardian ad Litem: _____

Email: _____ Telephone: _____

Type of Hearing (Select) – except Rule to Show Cause:

Uncontested Divorce	
Approval of Agreement	
Separate Maintenance	
Motion	
Temporary Relief	
Adoption	
Name Change	
Other:	

Are the Issues Contested: _____ Yes _____ No

Time Needed: _____

Date mediation report filed: _____ Date agreement filed: _____

Hearing Requested by: _____ for Plaintiff _____ for Defendant _____

I have been advised that I have the legal right to personally appear in the Charleston County

Family Court, and I understand this right. But, I give up and waive this right to personally appear in Charleston County Family Court and consent to appear by Video Conferencing.

I acknowledge that I want to handle the following matter via Video Conferencing by initialing the type of hearing below:

_____ (Hearing) _____ (Plaintiff) _____ (Defendant)
[initial here] [initial here]

I also acknowledge that the outcome or consequence of this matter would be no different as though I appeared in person.

By my signature below, I, consent to the use of Video Conference in this Family Court proceeding. I have been fully informed of my right to be personally present before the Court for this proceeding and, with that knowledge, I voluntarily waive that right.

Party Consenting to Video Conferencing:

Plaintiff:

Witness:

_____ (Signature) _____ (Signature)
_____ (Print Name) _____ (Print Name)

Defendant:

Witness:

_____ (Signature) _____ (Signature)
_____ (Print Name) _____ (Print Name)

****** Section below to be completed by Clerk of Court ******

The hearing in this matter is scheduled for ____ day of _____ 2020, at _____ (time)
____ a.m./____ p.m., before the Honorable _____ for _____ (length of time).

Proof of service of the Notice of Hearing must be filed not less than five (5) days prior to the scheduled hearing. Pursuant to Section 13 of Order of the Supreme Court of South Carolina No.: 2020-000447, service of Notice of Hearing may be served upon counsel of record via e-mail.

Any affidavits, certifications, exhibits or documents necessary for all hearings must be filed not less than five (5) days prior to the scheduled hearing.

This form may be submitted to the Family Court Clerk's office in the Charleston County Courthouse, via United States Postal Service, or e-mail to famctfilings@charlestoncounty.org.

Request for hearing approved or denied (please circle one) by Judge _____.