

**STATE OF NEW MEXICO
 COUNTY OF DOÑA ANA
 THIRD JUDICIAL DISTRICT COURT**

STATE OF NEW MEXICO/HSD, (if a Petitioner or Intervenor)

_____, **Petitioner,**

v. **Case No. D-307-DM-** _____
Judge: _____

_____, **Respondent.**

REQUEST FOR HEARING

(YOU MUST FILE THIS REQUEST TO GET A HEARING [COURT DATE] ABOUT YOUR MOTION)

- I NEED A HEARING ABOUT: MY MOTION TO/FOR _____
(print on this line what you asked for in your motion)
 FINALIZING MY CASE (TRIAL ON THE MERITS)
- I REQUEST INTERPRETATION SERVICES(CHECK ONE): Yes NO
 IF YES, PLEASE DESCRIBE WHAT YOU NEED: _____
- HOW LONG YOU THINK IT WILL TAKE TO TALK TO THE JUDGE: 15 MINUTES 30 MINUTES
 1 HOUR MORE THAN 1 HOUR
- IS THERE A HEARING ALREADY SCHEDULED IN THIS CASE: NO YES - WHEN? _____
- (A, B OR C) TO CERTIFY THAT THIS REQUEST WILL BE DELIVERED TO ALL OTHER PARTIES: A - ON THE SAME DAY I FILE THIS REQUEST
 B - WITH MY MOTION
 C - WITH MY PETITION
- LIST EVERYONE IN THIS CASE SO THE COURT CAN SEND THEM A NOTICE ABOUT THE HEARING DATE:

	OTHER PARTY OR THEIR LAWYER	ME	<input type="checkbox"/> HSD (<input checked="" type="checkbox"/>
<i>NAME</i>		SEE SIGNATURE BELOW	HUMAN SVCS. DEPT.
<i>ADDRESS</i>		USE ADDRESS BELOW	653 UTAH AVE.
<i>CITY/STATE/ZIP</i>		USE ADDRESS BELOW	LAS CRUCES, NM 88001
<i>TELEPHONE</i>		USE TELEPHONE BELOW	524-6118

(SIGN YOUR NAME) _____

(PRINT YOUR NAME) _____

(YOUR MAILING ADDRESS) _____

(CITY/STATE/ZIP) _____

(YOUR TELEPHONE) _____



WHEN YOU FILE THIS REQUEST, YOU MUST GIVE THE CLERK STAMPED LETTER ENVELOPES FOR YOU AND FOR EACH PARTY/LAWYER. THE COURT USES THE ENVELOPES TO MAIL OUT THE COURT DATE.