

**REQUEST FOR REMOTE TESTIMONY**

JD-FM-295 New 10-21  
C.G.S. § 46b-15c; P.A. 21-78 §§ 2, 6, 7

For information on ADA accommodations,  
contact a court clerk or go to:  
[www.jud.ct.gov/ADA](http://www.jud.ct.gov/ADA).

STATE OF CONNECTICUT  
**SUPERIOR COURT**  
[www.jud.ct.gov](http://www.jud.ct.gov)



**Instructions to Applicant**

1. If a restraining order, protective order, or standing criminal protective order has been issued on your behalf or on behalf of your child and you want to give testimony remotely in a family court proceeding, you must fill out and file this form with the court at least 2 days before your hearing date.
2. You must provide your contact information (phone number and/or e-mail address) in order for the court to set up your remote testimony.
3. If your contact information is protected by a court order or by operation of law, **do not** include your phone number or e-mail address below, but fill out the rest of the form. You must, however, contact the clerk's office when you file this form so the court can set up your remote testimony.

COURT USE ONLY

REMTEST



**Instructions to Clerk**

1. Upon receipt, arrange for the testimony in accordance with the request.
2. Inform the judicial authority who will be presiding over this family court proceeding that the party below will be appearing remotely.

Name of Plaintiff	Name of Defendant	Docket number
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I, *(name)* \_\_\_\_\_, have a restraining order, protective order, or standing criminal protective order issued on my behalf or on behalf of my child. The other party to this case is the subject of that/those order(s). A family court proceeding in this case is scheduled for *(date – must be at least 2 days from the file date of this request)* \_\_\_\_\_ and I would like to testify *(Select one)*

- At the courthouse, but outside the presence of the other party.
- Remotely (from home or another location).

Signed <i>(Signature of filer)</i> ▶	Print name of person signing	Date signed
E-mail address	Telephone number	