

STATE OF INDIANA) IN THE _____ COURT
) SS: CIVIL DIVISION, ROOM _____
COUNTY OF _____) CAUSE NO. _____

IN RE THE _____ OF:

Petitioner,

v.

Respondent.

APPEARANCE BY UNREPRESENTED PERSON IN CIVIL CASE

This Appearance Form must be filed on behalf of every party in a civil case.

1. My name is: _____ and I am
 Initiating (filing)
 Responding (answering or defending)
 Intervening

in this case I am not represented by a lawyer.

2. Contact information for receiving legal service of documents and case information as required by Court Rules. *(NOTE: If you are the Initiating party and this case, or a related case, involves a protection from abuse order, a workplace violence restraining order, or a no-contact order, you must provide an address for the purpose of legal service of documents but that address should not be one that exposes the whereabouts of the petitioner.)*

Address:

Email address: _____

I will accept service at the above email address

Phone: _____

Fax: _____

OR, if in the related case, you have used the Attorney General Confidential address, you may check the box below:

Attorney General confidential address

3. This is a _____ case type as defined in Administrative Rule 8(B)(3).
(This clerk will tell you the case type if you don't know it, so you may *handwrite* your response at the Clerk's Office.)

4. There are related cases: (If yes, please indicate below)

<input checked="" type="radio"/>	Yes
<input type="radio"/>	No

Caption and case number of related cases:

Caption: _____	Case No.: _____
Caption: _____	Case No.: _____
Caption: _____	Case No.: _____
Caption: _____	Case No.: _____
Caption: _____	Case No.: _____
Caption: _____	Case No.: _____

Additional information as required by local rule:

Signature

CERTIFICATE OF SERVICE

I hereby certify that I sent a copy of this Appearance by first class mail to the opposing party if the opposing party is not represented by an attorney on

_____.

Signature