

**This is a private record.**

\_\_\_\_\_  
My Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
City, State, Zip

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Email

I am the  Petitioner  
 Respondent  
 Interested person  
 Attorney for the  Petitioner  Respondent  Interested person and  
my Utah Bar number is \_\_\_\_\_

In the District Court of \_\_\_\_\_ County, Utah

Court Address \_\_\_\_\_

<p>In the Matter of Protection for _____ Respondent/Protected Person</p>	<p><b>Request to Assign a Court Visitor</b></p> <p>_____ Case Number</p> <p>_____ Judge</p>
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- (1) I request that the court assign as a court visitor (Choose one.)
- \_\_\_\_\_ (name), a person who is trained in law, nursing, or social work with no personal interest in the proceedings.
- a volunteer from the court's volunteer court visitor program. (Available only in Districts 2, 3, 4 and 7.)
- (2) I request that the visitor inquire about: (Choose one.)
- whether to excuse the Respondent from attending the hearing under Section 75-5-303.



### Certificate of Service

I certify that I served a copy of this document on the following people.

Person's Name	Method of Service	Served at this Address	Served on this Date
(Other Party or Attorney)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
Interested Person or Attorney	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
Interested Person of Attorney	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.)		
(Clerk of Court)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File		

Sign here ►

\_\_\_\_\_ Date

\_\_\_\_\_ Typed or Printed Name