



STATE OF MARYLAND
OR

☐ CIRCUIT COURT ☐ DISTRICT COURT OF MARYLAND FOR _____

City/County

Located at _____

Court Address

Telephone _____

Case No. _____

Name _____

VS.

Name _____

Address _____

Address _____

City, State, Zip _____

City, State, Zip _____

MOTION FOR REMOTE PROCEEDING OR TO APPEAR REMOTELY
(Md. Rules 21-201; 21-301; 3-513.1)

1. The following proceeding is scheduled for _____ :
Date

☐ Scheduling conference

☐ Hearing (*describe*): _____

☐ Evidentiary hearing

☐ Pre-trial conference

☐ Trial

☐ Other (*describe*): _____

2. I ask that the following people be allowed to participate from a location other than the courtroom
(*choose all that apply*):

☐ Plaintiff/Petitioner: _____

Name

Telephone Number

E-mail

Requested method of participation:

☐ Telephone

☐ Video Conferencing

☐ Other (*describe*): _____

☐ Defendant/Respondent: _____

Name

Telephone Number

E-mail

(*If applicable*):

ID Number

Facility of Incarceration

Requested method of participation:

☐ Telephone

☐ Video Conferencing

☐ Other (*describe*): _____

☐ Plaintiff/Petitioner's Attorney: _____

Name

Telephone Number

E-mail

Requested method of participation:

☐ Telephone

☐ Video Conferencing

☐ Other (*describe*): _____

☐ Defendant/Respondent's Attorney: _____

Name

Telephone Number

E-mail

Requested method of participation:

☐ Telephone

☐ Video Conferencing

☐ Other (*describe*): _____

Case No. _____

☐ Witness: _____
Name _____

Telephone Number _____ E-mail _____

Requested method of participation: ☐ Telephone ☐ Video Conferencing

☐ Other (*describe*): _____

☐ Other: _____
Name _____

Telephone Number _____ E-mail _____

Requested method of participation: ☐ Telephone ☐ Video Conferencing

☐ Other (*describe*): _____

3. I ask this because:

4. ☐ The attorney and client will be able to communicate confidentially by:

Complete only if the person appearing remotely is an attorney or a person represented by an attorney.

5. The person appearing remotely will have access to documents, photographs and other items presented in the courtroom by:

6. A spoken or sign language interpreter (*choose one*):

☐ is not required by the person appearing remotely.

☐ is required by the person appearing remotely.

*For a spoken language interpreter, complete and file a Request for Spoken Language Interpreter (CC-DC-041).

*For a sign language interpreter, complete and file a Request for Accommodation for Person with Disability (CC-DC-049).

7. The remote appearance will not interfere with making a verbatim record of the hearing.

Date

Signature Attorney Number

Printed Name

Telephone Number

Address

Fax

City, State, Zip

E-mail

Case No. _____

CERTIFICATE OF SERVICE

I certify that I served a copy of this motion, upon the following party or parties by ☐ mailing first-class mail,
postage prepaid ☐ hand delivery ☐ other _____, on _____ Date _____ to:

_____	_____
Name	Address
_____	_____
	City, State, Zip
_____	_____
Name	Address
_____	_____
	City, State, Zip
_____	_____
Date	Signature of Party Serving