Full Name of Party Filing Document

Mailing Address (Street or Post Office Box)

City, State and Zip Code

Telephone

Email Address (if any)

IN THE DISTRICT COURT FOR THE JUDICIAL DISTRICT

FOR THE STATE OF IDAHO, IN AND FOR THE COUNTY OF

|  |  |
| --- | --- |
|  , Plaintiff, vs. , Defendant. | Case No. REQUEST FOR TRIAL SETTING IN MAGISTRATE CASE |

1. I want my case scheduled for trial.

2. My case is for (for example, divorce, custody, modification):

3. ⬜ A jury has been timely requested. **or** ⬜ A jury was not timely requested.

4. ⬜ I request mediation. **or** ⬜ Mediation would not be helpful.

5. ⬜ I will represent myself at trial. **or** ⬜ I will have the following attorney appear at trial for me

6. Estimated trial time:

7. I am NOT available for trial on these dates:

8. Pretrial is ⬜ requested ⬜ not requested.

Date:

Typed/printed Signature

CERTIFICATE OF SERVICE

I certify that on (date) I served a copy to: (name all parties in the case other than yourself)

|  |  |
| --- | --- |
|  (Name) (Street or Post Office Address) (City, State, and Zip Code) | * By United States mail
* By personal delivery
* By fax (number)
 |
|  (Name) (Street or Post Office Address) (City, State, and Zip Code) | * By United States mail
* By personal delivery
* By fax (number)
 |
|  Typed/printed name |  Signature |