

IN THE CIRCUIT COURT OF THE
ELEVENTH JUDICIAL CIRCUIT
IN AND FOR MIAMI-DADE COUNTY,
FLORIDA

FAMILY DIVISION

IN RE:

CASE NO.:

_____,
Petitioner,

and

_____,
Respondent.

**AFFIDAVIT REQUESTING WAIVER
OF MANDATORY REVIEW BY
THE FAMILY COURT SELF HELP
PROGRAM PURSUANT TO LOCAL RULE**

I, _____, swear or affirm to the following:

1. I am filing an action in the Family Division as a self-represented litigant.
2. I am requesting a waiver of the mandatory review by The Family Court Self-Help Program pursuant to local rule (03-11-1997) to proceed with my action for good cause.
3. I understand and affirm that by waiving my participation in The Family Court Self-Help Program I am precluding myself from receiving any services from the Self-Help Program in the future for the above cause.

I understand that I am swearing or affirming under oath to the truthfulness of the claims made in the affidavit and that the punishment for knowingly making a false statement includes fines and/or imprisonment.

Dated: _____

Signature of Party: _____
 Printed Name: _____
 Street Address: _____
 City, State, Zip: _____
 Telephone No.: _____
 Email: _____

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

Sworn to or affirmed and signed before me on _____ by _____.

NOTARY PUBLIC or DEPUTY CLERK

_____ Personally known

_____ Produced identification: _____

ORDER WAIVING MANDATORY REVIEW BY THE FAMILY COURT SELF HELP PROGRAM

THIS MATTER came before the Court on _____, upon the litigant's request to waive mandatory review by the Family Court Self Help Program and it is hereby GRANTED.

DONE AND ORDERED in Chambers, at Miami-Dade County, Florida this _____ Day of _____, 20____.

CIRCUIT COURT JUDGE