

STATE OF NORTH CAROLINA
COUNTY OF BUNCOMBE

IN THE GENERAL COURT OF JUSTICE
DISTRICT COURT DIVISION
FILE NO: ___ CVD ___

_____,
Plaintiff,

JUDGE: _____

vs.

_____,
Defendant.

**CALENDAR CALL
ATTORNEY AVAILABILITY FORM**

If you will not be appearing at calendar call, this form **MUST BE RECEIVED** by Family Court **no later than 12:00 Noon on the Monday prior** to the scheduled calendar call to the appropriate Family Court Case Coordinator: Anne Elliott for Judge Scott & Judge Dotson-Smith & Cyndi Williams for Judge Dray.

FAX: (828) 259-3372 or Email to:
Cynthia.W.Williams@nccourts.org (for Judge Dray)
Anne.H.Elliott@nccourts.org (for Judge Scott & Judge Dotson-Smith)

Case Information: Judge: _____ Calendar call date: _____

Term beginning: _____ **Estimated length
of hearing/trial** _____

Attorney Information: Name: _____

Telephone: _____ FAX: _____ E-mail: _____

Reason for unavailability: _____

Opposing Attorney name: _____

*Calendar term availability: Mark an **X** when you are **NOT** available during the Court term:*

TRIAL WEEK ONE					
	Monday	Tuesday	Wednesday	Thursday	Friday
AM					
PM					

TRIAL WEEK TWO					
	Monday	Tuesday	Wednesday	Thursday	Friday
AM					
PM					

Attorneys agree on the following days and times (subject to Court approval): _____

Date: _____ Attorney for: _____