

STATE OF NORTH CAROLINA
_____ COUNTY

IN THE GENERAL COURT OF JUSTICE
DISTRICT COURT DIVISION
File no:

Assigned Judge: _____

_____)
Plaintiff,)
_____)
_____)
_____)
_____)
_____)
_____)
_____)
_____)
Defendant.)

**MOTION TO APPOINT
THE CHILD'S ADVOCATE**

Plaintiff / Defendant (circle one) files this motion to have The Child's Advocate, a project of Legal Aid of North Carolina, appointed as attorney for the minor child(ren), whose custody is at issue in this case. In support of this Motion, the undersigned states as follows:

1. There is a controversy concerning the minor child(ren) aged 7 and above:

_____, born _____.
_____, born _____.
_____, born _____.

2. It is appropriate to have an attorney appointed for the minor child(ren) because of one or more of the following:

- Allegations or findings of family violence (domestic violence and/or child physical, sexual, or psychological abuse);
- Substance abuse or mental instability of a parent;
- Special needs of a child requiring additional investigation and advocacy (mental health, medical, educational, etc.);
- Child resisting/refusing visitation with a parent;
- Potential relocation of a parent
- Child's gender identity or sexual orientation is a contested issue;
- Other compelling reason: _____

NOTE: Due to TCA's limited resources, a high level of acrimony between parents is NOT sufficient to warrant the appointment of a child's attorney.

3. The undersigned has contacted the other party directly or through counsel if represented.
4. The other party **consents/objects** (circle one) to the appointment of an attorney for the minor child(ren).

WHEREFORE, the undersigned respectfully requests that the Court appoint The Child's Advocate as attorney for the minor child(ren):

Date: _____

 Plaintiff /Attorney for Plaintiff
 Defendant/Attorney for
Defendant

Name:

Address:

Telephone No:

Email Address:

CERTIFICATE OF SERVICE

I hereby certify that I have served all parties, or their attorneys, and The Child’s Advocate with the foregoing **Motion to Appoint the Child’s Advocate**:

_____ By e-File and serve to:

The Child’s Advocate: TCAIntake@legalaidnc.org;

Plaintiff/Attorney for Plaintiff: _____ and/or

Defendant/Attorney for Defendant: _____

_____ By placing a copy in the United States Mail, postage prepaid, addressed as follows:

The Child’s Advocate
P.O. Box 106
Raleigh, NC 27602

Plaintiff/Attorney for Plaintiff
Address

Defendant/Attorney for Defendant
Address

This the _____ day of _____, 20____.

- Plaintiff /Attorney for Plaintiff
- Defendant/Attorney for Defendant

Name:
Address:
Telephone No:
Email Address: