## **Request for Transcript (Child Welfare Appeals)**

Transcripts must be ordered online at www.utcourts.gov. You may use this form **only** if you do not have access to a computer. Mail or hand deliver this form to:

Transcript Coordinator 450 S State Street, 5<sup>th</sup> Floor PO Box 140230 Salt Lake City, UT 84114

Name		Court Location		
Address		Case Name		
City, State, Zip		Child's Date of Birth		
Phone		Juvenile Court Case Number		
Email		Appellate Court Case Number		
To: Transcript Coord  (1) Please arrange in this case before juve prepared, certified and needed]	for a transcript of the enile court Judge	· · · · · · · · · · · · · · · · · · ·	(name) to	be
Date	Proceeding Start Time	Proceeding Stop Time	Courtroom	
(2) The transcript	[] is [] is not fo	r an appeal.		
Date	Sign here	<b>&gt;</b>		
	Typed or Printed Nar	me		

## **Certificate of Service** \_\_\_\_ (date) a copy of this Transcript Request was served on I certify that on all parties listed here by the method indicated below: Mailed Emailed Hand-delivered Name Mailing or Email Address [] [] [] [] [] [] [] [] [] [] [] [] Sign here ▶ Date

Typed or Printed Name