

ATTENDANCE AT ORAL ARGUMENT

JD-SC-6 Rev. 3-23
P.B. §§ 70-4, 71-4, 79a-11

STATE OF CONNECTICUT
**SUPREME COURT
APPELLATE COURT**
www.jud.ct.gov



Instructions

1. Complete all information requested and **PRINT LEGIBLY**.
2. This form does not constitute an appearance.
To file a new appearance, contact the Office of the Appellate clerk.
3. Fill out fully, indicating SC/AC docket number, name of case, and your name and address, including zip code.
4. Give form to clerk in the courtroom on date of argument, or upload as preliminary papers/ appeal documents and select "Attendance at Oral Argument" for videoconference argument.

For information on ADA accommodations, contact the Centralized ADA Office at 860-706-5310 or go to: www.jud.ct.gov/ADA/

SC/AC docket number

Date of argument

Name of Case	Plaintiff	
	Defendant	
Counsel or Self-Represented Party Arguing the Case	Name of counsel or self-represented party (include title if appropriate)	Telephone number
	Address of counsel or self-represented party.	
	Are you Assigned Counsel appointed pursuant to General Statutes § 51-289 et seq.? <input type="checkbox"/> Yes <input type="checkbox"/> No	
For arguments conducted by videoconference	Provide a telephone number you can be reached at during the argument.	
E-mail	E-mail address	Note: Notice of release of decisions will be given by e-mail only to the e-mail address listed.
Accompanying Counsel	Name(s) (include title(s) if appropriate)	
Counsel or Self-Represented Party on Brief	Name(s) (include title(s) if appropriate)	

Representing: (Select all that apply)

- Appellant(s)
- Cross appellant(s)
- Appellee(s)
- Cross appellee(s)
- All plaintiffs
- The following plaintiff(s) only: _____
- All defendants
- The following defendant(s) only: _____
- Amicus Curiae
- The State of Connecticut
- Other: _____