

IN THE CIRCUIT COURT, TWENTIETH JUDICIAL CIRCUIT,
IN AND FOR LEE COUNTY, STATE OF FLORIDA
JUVENILE DIVISION

IN THE INTEREST OF:

CASE NO.:

Minor Child(ren) _____ /

NOTICE OF HEARING

TO: Children's Legal Services, Department of Children and Family Services
P.O. Box 60085, Fort Myers, Florida 33901

Joyce Mieses, Assistant Program Director, Lutheran Services of Florida,
4150 Ford St .Ext, Suite 1C, Fort Myers, FL 33916

Guardian ad Litem Program, 1700 Monroe St., 6th Floor, Ft. Myers, FL
33901

The Permanent Guardian(s), _____, at:

The Mother / Father, _____, at:

PLEASE BE ADVISED that the undersigned will bring on to be heard a hearing on **Motion to Reopen and Modification of Permanency Order** scheduled as follows:

Judge: _____

Location: Lee County Justice Center, Court Room 3A, (3rd Floor)
1700 Monroe Street, Fort Myers, Florida 33901

Date: _____

Time: _____ AM/PM (circle one) or as soon thereafter as may be heard.

PLEASE GOVERN YOURSELF ACCORDINGLY.

AMERICANS WITH DISABILITIES ACT

If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact the Court Operations Manager, Brooke Dean, whose office is located at Lee County Justice Center, 1700 Monroe Street, Fort Myers, Florida 33901 and whose telephone number is (239) 533-1705, at least 7 days before your scheduled court appearance, or immediately upon receiving this notification. If you receive this notification less than 7 days prior to ore your scheduled appearance is less than 7 days away or if you are hearing or voice impaired, call 711.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that a true and correct copy of the foregoing Notice of Hearing has been furnished to the above-named addressee by Hand-Delivery/U.S. Mail this ____ day of _____, 20____.

Signed: _____

Print Name: _____

Address: _____

Phone No.: _____