

Code:
Name: _____
Address: _____

Email: _____
Telephone: _____
 Attorney, Bar Number: _____
 Self-Represented Litigant
 Law Enforcement Officer

DISTRICT COURT
 JUSTICE COURT IN THE TOWNSHIP OF _____
_____ COUNTY, NEVADA

Applicant (*Print your name above*),
vs.

CASE NO.: _____
DEPT: _____

Adverse Party (*Print the name of the person you
believe poses a risk of causing injury*).

Notice of Hearing

TO: (*Adverse party's name*) _____

PLEASE TAKE NOTICE that on _____ (*Date application for
extended order was filed*) the following person (*Name of applicant*) _____
petitioned the court for an extended high-risk protection order to be issued against you.

DATE AND TIME OF COURT APPEARANCE (*The court clerk will fill this out*)

A hearing on the application for an extended high-risk protection order will take place on
the: ____ day of _____, 20____, at _____ a.m. p.m., at the courthouse of
the Second Judicial District Court, located at 75 Court Street, Reno, NV 89501 1 South Sierra
Street, Reno, NV 89501, Courtroom number _____.

Any protection order in effect will continue to be in effect until such hearing and further order of this court.

You have the right to proceed with or without counsel. If you do not attend the hearing, an order may be issued in your absence. You may file a written response to the Application for High-Risk Protection Order with the Court, located at 75 Court Street, Reno, NV 89501 or 1 South Sierra Street, Reno, NV 89501. The Court will consider your response at the hearing.

Forms are available at the Second Judicial District Court or online at www.washoecourts.com.

DATED this ____ day of _____, 20__.

CLERK OF COURT

BY: _____
DEPUTY CLERK