## **Entry of Appearance for Self-Represented Persons**

PLEASE READ ALL OF THE INFORMATION CONTAINED IN THIS PACKET BEFORE YOU START FILLING OUT THE FORMS.

THIS PACKET DOES NOT CONSTITUTE LEGAL ADVICE. IF YOU HAVE ANY QUESTIONS ABOUT THIS PROCESS, YOU SHOULD SEEK THE ADVICE OF AN ATTORNEY. THE COURT ASSUMES NO RESPONSIBILITY AND ACCEPTS NO LIABILITY FOR ACTIONS TAKEN BY USERS OF THESE DOCUMENTS, INCLUDING RELIANCE ON THEIR CONTENTS.

We encourage you to contact an attorney to advise you on this matter. If you cannot afford an attorney, the Court will not appoint an attorney for you. You may contact Northwestern Legal Services at (800) 665-6957 or (814) 724-1040 to see if they will provide free legal services to you. They are not obligated to do so.

You will be required to follow the State and Crawford County Rules of Civil Procedure and all applicable

laws even if you do not have an attorney.

This packet is for notifying the Court and the other parties in your <u>custody</u>, <u>divorce</u>, <u>support</u>, <u>protection from abuse</u>, <u>paternity</u>, or other domestic relations case that you are representing yourself.

If you do not have an attorney because you do not want to hire an attorney, or you cannot afford an attorney and Northwestern Legal Services is unable to assist you, then you should fill out and file the "Entry of Appearance as a Self-Represented Party" in this packet.

Filing this form will NOT prevent you from hiring an attorney during your case if you change your mind.

To complete this packet, you will need:

- Your contact information;
- The name of your former attorney, if you had one; and
- The names and addresses of all self-represented parties and the attorneys of any parties that have legal representation.

## Instructions:

- 1. When filling out this form, please write as clearly and neatly as possible.
- 2. Fill out this form to the best of your ability, completing every line that applies. DO NOT LEAVE ANY LINES BLANK. Use "None" or "0" if necessary. Do NOT use "N/A" anywhere on the forms.
- 3. Check the original complaint in your case to find out who the "Plaintiff" and "Defendant" are. Be sure the caption is filled out EXACTLY the same on this form; you should always have the same names in the same place on each filing. The "No." line is for the case number, which was assigned when the original complaint was filed.
- 4. When you are filling out the "Entry of Appearance as a Self-Represented Party" [page 3], pay close attention to paragraph 6. If you have PFA against someone involved in this case and you do not want them to know where you live, you can check the box for confidentiality and provide an alternate address, P.O. Box, or just a fax number to receive service.
- 5. Make <u>at least</u> 2 (two) photocopies of your Entry of Appearance form and the "Certificate of Compliance" [page 4]. File the originals with the Prothonotary's Office and keep one copy for your records.
- 6. You will have to serve the other photocopies on the parties that you listed in paragraph 3 of your "Entry of Appearance as a Self-Represented Party" as directed by Pennsylvania Rule 440. Generally:
  - a. <u>If a party has an attorney</u>, you should mail by regular first class mail, hand deliver or leave a copy of the documents at their attorney's office. If the attorney has a box in the Prothonotary's Office, you can leave their copy in their box if the attorney previously agreed in this case to receive service that way.
  - b. <u>If a party does not have an attorney and you know that party's current address</u>, you should mail by regular first class mail, hand deliver or leave a copy of the documents at the party's home.
  - c. <u>If a party does not have an attorney and you do not know that party's current address</u>, you should mail by regular first class mail or leave a copy of the documents at the address that the party put on their most recent pleading in this case, or hand deliver the documents if you can locate that party somewhere else.
  - d. You can serve the documents by fax if a party or their attorney agreed, or if a party or their attorney put a fax number on an earlier pleading in this case. Please read Rule 440(d)(2) to see how the fax cover sheet should be prepared.

## IN THE COURT OF COMMON PLEAS OF CRAWFORD COUNTY, PENNSYLVANIA Civil Action – Law

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Plainti	ff	: :			
VS.		: No			
		: :			
Defend	dant	:			
	E	ENTRY OF APPEARANCE AS A SELF-REPRESENTED PARTY			
1.	I am the 🔲 Plaintiff 🔲	Defendant in the above captioned matter.			
2.	I am entering my appear	appearance as a self-represented party (your signature).			
3. upon t	·	ontact information changes, I must file a new copy of this arties and the attorneys of represented parties in this case			
	l, please remove the name o	reviously represented by an attorney in this matter. If I do of	, Esq., from this matter. I certify		
	•	on			
<u>Name</u>		<u>Address</u>			
6.	•	or the purpose of communication and service regarding t			
	none: ()		) -		
M	ly contact information is con	nfidential pursuant to my "Protection From Abuse Order"	, Case No		
I UND WILL B	ERSTAND THAT THIS ADDR	ersonal contact information but should be used for services WILL BE THE ONLY ADDRESS TO WHICH NOTICES AND SPONSIBLE TO CHECK THE MAIL AT THIS ADDRESS SO I E	ID PLEADINGS IN THIS CASE		
7. Civil Pr	I understand that while re rocedure and all applicable l	epresenting myself I will be required to follow the State a aws.	and Crawford County Rules of		
8.	I understand that this Entry of Appearance will not delay any deadlines or hearings in my court case.				
_	alse statements herein are r	re is true and correct to the best of my knowledge, infor made subject to the penalties of 18 Pa.C.S. § 4909 relation			
Date		Signature			

## IN THE COURT OF COMMON PLEAS OF CRAWFORD COUNTY, PENNSYLVANIA

	:		
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V.	: :	No	
	<u>.</u> :		
	CERTIFICATE OF	COMPLIANCE	
This form is associated with the	pleading titled	_	, dated
, 20			
I certify that this filing complies	with the provisions of the	Public Access Policy	of the Unified Judicial System c
Pennsylvania: Case Records of the			
documents differently than non	-confidential information a	and documents.	
Signature	Date		
Name:	Attor	rney No. (if applicable	e):
Address:			
	Telep	ohone:	
	Emai'	il:	
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