

# APPLICATION TO CHANGE METHOD OF ATTENDANCE

## Form 3

In the Provincial Court of British Columbia  
Under the

*Snw'uy'ulhtst tu Quw'utsun Mustimuhw u' tu Shhw'a'luqwa'a' i' Smun'eem*  
[Laws of the Cowichan People for Families and Children]

REGISTRY FILE NUMBER
REGISTRY LOCATION

<b>In the matter of the Smun'eem:</b>	
Name(s)	Date(s) of Birth (mm/dd/yyyy)
_____	_____
_____	_____
_____	_____
_____	_____

<b>The parent(s)/care provider(s) of the Smun'eem is/are:</b>
Name(s)
_____
_____
_____

Applicant name		
Address		
City	Province	Postal Code
Phone	Email	Fax

**I am** Choose one of the following options

- CEO or delegate
- Lawyer/Lawyer of Record for Name \_\_\_\_\_
- Parent / Care Provider
- Designated Representative
- Other Name \_\_\_\_\_

**1. I am applying for an order to allow:**

Select all options that apply

- Me
- Parent(s) / Care Provider(s) Include name(s) \_\_\_\_\_
- Witness(es) Include name(s) \_\_\_\_\_
- Other Specify \_\_\_\_\_  
(the "Participant")

Choose one of the following options. If Hearing, Trial, Continuation, or Other, please also complete section 2 below.

to attend at the:

- Case Conference
- Hearing
- Trial
- Continuation
- Other Specify \_\_\_\_\_

Scheduled for \_\_\_\_\_ at \_\_\_\_\_  am  pm by \_\_\_\_\_  
mm/dd/yyyy Time Method of attendance

By another method of attendance as follows: Choose one of the following options

- Audioconference (telephone)
- Videoconference (MS Teams)
  - I confirm the Participant has the means to appear by videoconference (computer/tablet/mobile, reliable internet connection)
- In person

For the following reasons: Must complete this section

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I understand I must promptly advise the other parties and other persons entitled to notice of this application of the outcome of this application, see Rule 8 Service and Proving Service.

2. The Participant intends to present oral evidence (for example, the Participant intends to testify or call witnesses to testify) at the appearance noted above?  Yes  No

If yes, this application must be served on all other parties and other persons entitled to notice of this application, see Rule 8 Service and Proving Service.

Additional information about oral evidence:

The Participant intends on  testifying and/or  calling witnesses to testify

*Insert total number of witnesses \_\_\_\_ and brief description of nature of their evidence*

Check box if you have attached a page with further information

**Registry to complete:**

This application will be made to the court on \_\_\_\_\_ at \_\_\_\_\_  am  pm  
Date Time

You may attend the court appearance by another method as specified.

in person at

court location

by another method of attendance, as specified

The registry will send within 24 hours before the hearing date noted above the link to connect by MS Teams, including a dial in conferencing number to be used by any party that is unable to use MS Teams or has problems with their video connection. If you have not provided your email address or telephone number to the registry on your Notice of Address for Service ([Form 8](#)), you must contact the registry to obtain the telephone conference or MS Teams conference information.

3. Select the following additional information that applies:

- The Participant requires and has requested or will request an interpreter  
 The Participant intends on presenting written evidence

*brief description of document(s) or materials*

Check box if you have attached a page with further information

**FOR COURT USE ONLY**

**Presiding Judge:**

Hearing:  required  not required  
Application:  granted  denied

Terms if granted/Reasons if denied: \_\_\_\_\_

Further court directions:  Check box if you have attached a page with further information

\_\_\_\_\_  
Signature

Date \_\_\_\_\_

**FOR REGISTRY USE ONLY**

Advised \_\_\_\_\_ at \_\_\_\_\_ am/pm on \_\_\_\_\_  
Name of applicant Time Date  
\_\_\_\_\_  
(Clerk initials)