

STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY

IN THE INTEREST OF

**Summons
(Termination of Parental Rights)**

Name

Case No. _____

Date of Birth

TO:

A Petition for Termination of Parental Rights to this child has been filed.

The provisions of the Indian Child Welfare Act do not apply. *(For an Indian child, use the Indian Child Welfare Act version [IW-1633] of this form.)*

You are summoned and required to appear on:

NOTICE OF HEARING		
Date	Time	Location (Include Room Number)
Circuit Court Judge		

IF YOU FAIL TO APPEAR, the court may hear testimony in support of the allegations in the attached Petition and grant the request of the petitioner to terminate your parental rights.

You have the right to have an attorney present. If you desire to contest the matter and cannot afford an attorney, the state public defender may appoint an attorney to represent you.

If you fail to appear and the court terminates your parental rights, a notice of intent to pursue relief from the judgment must be signed and filed in the trial court within 30 days after the judgment is entered, in order to preserve the right to pursue such relief.

If you require reasonable accommodations due to a disability to participate in the court process, please call _____ prior to the scheduled court date. Please note that the court does not provide transportation.

Signature of Petitioner or Petitioner's Attorney (if not signed by a Circuit Court Judge)

Name Printed or Typed

Date