

DECLARATION OF TEMPORARY VOLUNTARY REMOVAL
RCW 26.09 GAL Certified Registry
Pierce County Superior Court

1. I, the undersigned, am currently appointed to the RCW 26.09 GAL Certified Registry of Pierce County Superior Court.
2. I request a temporary voluntary removal from the registry because____

_____.
3. I wish to be removed effectively immediately until _____.
4. I wish to be re-instated to the registry on _____.
5. Listed below are all cases to which I have been appointed by the Superior Court and have not yet been discharged or completed my work. For **each** case, I have indicated the current status of each case and my plan for future involvement. A separate sheet is attached in order to list all additional cases and required information for each case not included on this page.

Superior Court cause number: _____

Case name: _____

Work performed to date:

_____	initial interviews
_____	preliminary report
_____	testified during discovery
_____	second or final interviews
_____	testified at trial
_____	other _____

Status/Plan:

_____ I will be able to continue on the case to conclusion
_____ I have made/am making a motion to the trial judge and/or family law judge, after notice to all parties, requesting withdraw from this case and another GAL be appointed to take my place.

_____ The reason(s) for my request for temporary voluntary removal prevent me from disposing of my cases in a proper, timely fashion and I request assistance from the family law department to reassign my cases.

6. I understand that I will not accept appointments as a RCW 26.09 G.A.L. unless I have been re-instituted to the Pierce County RCW 26.09 GAL Certified Registry at the time indicated above and upon written verification from the Chair of the GAL Committee.

7. I further understand that notice of my temporary voluntary removal shall be sent to all judicial officers of the Pierce County Superior Court and to the Administrator of the Courts in Olympia.

I declare under penalty of perjury under the laws of the State of Washington the foregoing information is true and correct.

DATED: _____

Signature

Print Name

Place signed (City, State)