

IN THE CIRCUIT COURT OF THE  
SECOND JUDICIAL CIRCUIT, IN  
AND FOR LEON COUNTY, FLORIDA

STATE OF FLORIDA

CASE NO.

v.

SPN:

\_\_\_\_\_ /

**WAIVER OF APPEARANCE**

I hereby waive my personal appearance in the case listed above for the \_\_\_\_\_  
scheduled for \_\_\_\_\_, 20\_\_\_\_ at \_\_\_\_\_.

I enter this waiver with the acknowledgment and understanding of the following:

(1) I have maintained contact with my attorney. I understand the nature of the proceeding that will be held on the date listed above and have discussed with my attorney any questions I have about the proceeding.

(2) This waiver is effective only for the proceeding noted above. I will be required to attend all future proceedings unless my personal appearance is waived for a specific future proceeding. I cannot waive my personal appearance for jury selection or trial.

(3) It is my responsibility to maintain contact with my attorney. It is my responsibility to notify my attorney of any change in my phone number or address.

(4) It is also my responsibility to notify the office of the Clerk of Court of any change in my address. I understand that the Clerk of Court will notify me of scheduled court appearances by mail sent to the address I have given the Clerk of Court. My failure to appear at any future proceedings may result in a warrant being issued for my arrest.

I have read the above conditions of my waiver of appearance and have discussed these conditions with my attorney. I understand these conditions and I am not under the influence of drugs or alcohol. I enter this waiver with the understanding that my personal appearance is unnecessary for this proceeding. No one has forced or threatened me to enter this waiver, and I am entering this waiver freely and voluntarily because I feel it is in my best interest. This waiver is signed the \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Defendant

I hereby certify that I am counsel for the Defendant and that I have informed the Defendant of the nature of this waiver and the proceedings that shall be held on the day for which the Defendant is waiving his personal presence. I believe the Defendant understands this waiver and the requirements that he maintain contact with me and appear at all future proceedings. I believe the Defendant is entering this waiver freely and voluntarily and with a full and complete understanding of his responsibilities.

\_\_\_\_\_  
Counsel for the Defendant