



JUDICIARY OF GUAM MEDIA APPLICATION FORM
 Guam Judicial Center • 120 West O'Brien Drive • Hagåtña, Guam 96910

INSTRUCTIONS:

- 1) Fill out form entirety, including case number, day and time of hearing you wish to attend above.
- 2) Ensure that you indicate the length of intended coverage below (i.e., entire trial, one hearing, etc).
- 3) Please note that the judge may or may not approve the request.
- 4) If you do not have a copy of the guidelines relating to media devices in a courtroom, one may be obtained from the Administrative Director's Office.

*** Note: You may fill out required fields online and print or you may print the form and fill out manually.**

APPLICATION MADE FOR CASE NO. _____

SCHEDULED ON _____ DAY OF _____ 200____, AT _____ A.M. / P.M.

1) Name of Media attendee(s) who will be in courtroom:

2) Corporation or organization your represent:

3) Date of Request:

4) Are you aware that the Judge presiding over this case may deny your request?

Yes _____ No _____

5) Do you agree to obey the Judge's directive relating to the use and placement of media devices?

6) Do you agree that in the absence of specific directives you shall follow the guidelines relating to the presence of media devices in the courtroom?

Yes _____ No _____

Yes _____ No _____

7) Media Representative's Signature:

Date: _____

TO BE FILLED OUT BY THE JUDGE PRESIDING OVER THE CASE AT ISSUE

REQUEST IS: **Approved** _____ **Disapproved** _____ (*check one*)

Judge's Signature: _____