

DISTRICT JUDICIARY:: DHEMAJI

Email id: dhemaji.session@gmail.com

Video Conference Information/Request Form

(The request must be made at least two (2) days prior to the date of listing and strictly during office hours)

Personal Details of Applicant:

Name (in Full)	
Designation	
Mobile No.	
Email-ID	
Address	

User Details: (✓ Right tick in the appropriate category)

Advocate ☐ Medical officer ☐ Investigation Officer ☐ other ☐

Particular of the Video Conference:

Case No.	
Name of the Court	
District	
Date of VC	
Time	

Declaration

- I hereby declare that the above-mentioned information provided are correct.
- I have received summons from the concerned court.
- I am submitting photocopy of my identity proof.
- No Audio/Video shall be recorded during the ongoing VC sessions.
- Mobile shall be in Silent mode.

Place:

Date:

Seal & Signature of the Applicant

Approved/Rejected

Seal & Signature of the Presiding Officer

Copy to-

- (i) The Systems Officer/Systems Assistant, Dhemaji District Judiciary, Dhemaji. He/She is directed to inform the applicant regarding approval/rejection.

VC No.:.....