

IN THE DISTRICT/SUPERIOR COURT FOR THE STATE OF ALASKA
AT _____

STATE OF ALASKA, DEPARTMENT OF)
HEALTH AND SOCIAL SERVICES,)
DIVISION OF PUBLIC HEALTH)
Petitioner,)
vs.)
_____)
Respondent. Minor)
_____)

Case No. _____ CI

**REQUEST FOR HEARING TO
CANCEL (VACATE) EX PARTE ORDER**
[AS 18.15.375(e)]

A medical officer from the State of Alaska determined that you have been exposed to a contagious disease. The State asked the court for an *ex parte* order requiring you to be tested, examined, or screened for the disease. The court granted the State's request on _____ and issued an *ex parte* order requiring you to undergo testing, examination, or screening. If you object to the court order, simply check the box below and return this form to the court.

I object to the *ex parte* order requiring me to undergo testing, examination, or screening. I request a hearing to cancel (vacate) the *ex parte* order.

Date

Your Signature (Respondent)

Your Phone

Print Your Name

Your Address