

CAUSE NO. _____

THE STATE OF TEXAS	§	IN THE PROBATE COURT
	§	
FOR THE BEST INTEREST	§	OF
	§	
AND PROTECTION OF	§	DENTON COUNTY, TEXAS

WAIVER OF RIGHT TO BE PRESENT AT EXTENDED HEARING

I, _____, do hereby state that I do not desire to be present at the EXTENDED HEARING on the Application for Renewal of Order for Extended Court-Ordered Mental Health Services filed with the County Clerk of Denton County.

I do hereby authorize said hearing officer to make the finding upon the basis of the Certificate(s) of Medical Examination for Mental Illness on file with said Court and to expedite the case to hearing at the earliest possible date.

Proposed Patient

Attorney for Proposed Patient

DATE: _____

GRANTED DENIED

**ASSOCIATE JUDGE
PROBATE COURT
DENTON COUNTY, TEXAS**