
Person Filing This Document (initials, if minor)

A Contact Mailing Address (Street or Post Office Box)

Contact City, State and Zip Code

A Contact Telephone Number

IN THE DISTRICT COURT OF THE _____ JUDICIAL DISTRICT OF
THE STATE OF IDAHO, IN AND FOR THE COUNTY OF _____

In The Matter Of:

(Petitioner's Initials)

A Minor Child, Petitioner.

CASE NO. _____ SP-_____

NOTICE OF APPEAL OF DENIAL OF
MINOR'S PETITION FOR JUDICIAL
AUTHORIZATION OF AN ABORTION

1. On _____ an order was entered in this case denying Petitioner's
request for judicial authorization for an abortion on the grounds:

_____ the Petitioner was not sufficiently mature and capable of giving informed
consent to the proposed abortion; and/or

_____ the proposed abortion was not in the best interests of the Petitioner.

2. Petitioner is appealing the decision in this case.

3. Petitioner has the right to appeal to the Idaho Supreme Court, and the order
described above is an appealable order pursuant to Idaho Appellate Rule 11(a)(1), and I.C. §18-
609A(6).

4. Petitioner requests a record and gives notice to the Court Clerk that the record,
including all pleadings and exhibits, should be immediately forwarded and filed with the Idaho
Supreme Court along with the audio recording of the hearing. Petitioner is exempt from paying
any fee for the clerk's record. An order was entered sealing the entire record.

5. Petitioner is filing this Notice of Appeal within five (5) days, excluding weekends and
holidays, from the date the petition was denied by the district court.

6. Petitioner asks the Court to schedule a hearing within 48 hours, excluding weekends
and holidays.

DATE: _____, 20____.

Submitted by:

Attorney for Petitioner/Petitioner (initials)_____