

IN THE _____ COURT OF _____ COUNTY,

Plaintiff,

v.

Defendant.

) Case No.: _____

MOTION FOR CONTINUANCE

COMES NOW, _____, the [Plaintiff/Defendant] in the above-entitled action, and respectfully moves this Honorable Court for an Order continuing the [Hearing/Trial] currently scheduled for the _____ day of _____, 20____, to a later date, and in support thereof states as follows:

1. The [Plaintiff/Defendant] is a party in the above-captioned matter, which is currently pending before this Court.
2. A [hearing/trial] in this matter is presently scheduled for the _____ day of _____, 20____, at _____ : _____ [a.m./p.m.].

GROUNDS FOR CONTINUANCE

3. Good cause exists for a continuance of the scheduled [hearing/trial]. The specific reasons necessitating this request are as follows:

4. This request for continuance is not made for purposes of delay, but rather to ensure that all parties have adequate time to prepare for the [hearing/trial] and to facilitate a fair and just resolution of this matter.

5. The [Plaintiff/Defendant] believes that a continuance will not prejudice any party and is in the interest of justice.

PRAYER FOR RELIEF

WHEREFORE, the [Plaintiff/Defendant] respectfully requests that this Honorable Court enter an Order:

- a. Granting this Motion for Continuance;
- b. Vacating the [hearing/trial] currently scheduled for the _____ day of _____, 20____; ;
- c. Rescheduling the [hearing/trial] for a later date convenient to the Court and all parties; and
- d. Granting such other and further relief as the Court deems just and proper.

Dated this _____ day of _____, 20____.

Respectfully submitted,

Signature

Printed Name: _____

Bar No. (if applicable): _____

Attorney for [Plaintiff/Defendant] / [Plaintiff/Defendant], Pro Se

Street Address: _____

City, State, Zip Code: _____

Phone: _____

Email: _____

CERTIFICATE OF SERVICE

I hereby certify that on this _____ day of _____, 20_____, a true and correct copy of the foregoing MOTION FOR CONTINUANCE was served upon the following parties by the method indicated below:

Recipient: _____

Address: _____

Method of Service: U.S. Mail, First-Class Postage Prepaid

Hand Delivery

Facsimile

Email

Electronic Filing System

Recipient: _____

Address: _____

Method of Service: U.S. Mail, First-Class Postage Prepaid

Hand Delivery

Facsimile

Email

Electronic Filing System

Signature of [Plaintiff/Defendant] or Attorney