SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
FAMILY COURT

_____
PRINT PETITIONER'S/PLAINTIFF'S NAME

PETITIONER/PLAINTIFF,

v.

Case No. _____

_____
PRINT RESPONDENT'S/DEFENDANT'S NAME

Judge _____

RESPONDENT/DEFENDANT.

REQUEST FOR CONTINUANCE

Does the Other Party Consent to this Motion? ☐ yes ☐ no

I, _____, am the ☐ PLAINTIFF/PETITIONER ☐ DEFENDANT/RESPONDENT in this case.
PRINT YOUR NAME

1. I respectfully ask this Court to continue the hearing scheduled for _____
DATE OF HEARING

2. I would like this Court to continue the hearing because

3. [YOU MUST GIVE **AT LEAST ONE DATE** TO WHICH YOU AND THE OTHER PARTY AGREE, EVEN IF THE OTHER PARTY DOES NOT WANT THE CONTINUANCE]

I would like the Court to set the hearing on one of the following dates:

☐ The following new date(s) are agreeable to both the other party and to me, if they are also agreeable to the Court:

_____	_____	_____
AGREEABLE DATE	AGREEABLE DATE	AGREEABLE DATE

☐ I was able to reach the other party or his/her attorney, but s/he refused to agree to a new date. The following dates are agreeable to me, if they are also agreeable to the Court:

_____	_____	_____
AGREEABLE DATE	AGREEABLE DATE	AGREEABLE DATE

☐ I tried but was unable to reach the other party. The following dates are agreeable to me, if they are also agreeable to the Court:

_____	_____	_____
AGREEABLE DATE	AGREEABLE DATE	AGREEABLE DATE

Request for Relief

I RESPECTFULLY REQUEST that the Court grant my Request for Continuance.

I ALSO REQUEST that the Court award any other relief it considers fair and proper.

I ☐ DO / ☐ DO NOT request an oral hearing in front of the judge on this motion.

Respectfully Submitted,

_____
SIGN YOUR NAME

_____
STREET ADDRESS

_____
CITY, STATE AND ZIP CODE

_____
TELEPHONE NUMBER

☐ SUBSTITUTE ADDRESS: CHECK BOX IF YOU HAVE WRITTEN SOMEONE ELSE'S ADDRESS OR PHONE NUMBER BECAUSE YOU FEAR HARASSMENT OR HARM.

POINTS AND AUTHORITIES IN SUPPORT OF MOTION

In support of this Request, I refer to:

1. Super. Ct. Gen. Fam. R. G.
2. The record in this case.
3. The attached supporting document(s), if any.

   [LIST ANY DOCUMENTS THAT YOU ARE ATTACHING]

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_____
PRINT PETITIONER'S/PLAINTIFF'S NAME

Case No. _____

PETITIONER/PLAINTIFF,

v.

_____
PRINT RESPONDENT'S/DEFENDANT'S NAME

RESPONDENT/DEFENDANT.

RULE 5
CERTIFICATE OF SERVICE

IF YOU HAVE ALREADY SERVED THE OTHER PARTY, YOU CAN FILL OUT AND FILE THIS CERTIFICATE OF SERVICE ON THE SAME DAY YOU FILE YOUR PAPERS.

IF YOU HAVE NOT ALREADY SERVED THE OTHER PARTY, YOU MUST FILL OUT AND FILE THIS CERTIFICATE OF SERVICE AFTER YOU SERVE THE OTHER PARTY.

I certify that I served a copy of my Request for Continuance to the other party or the other party's attorney on _____.
PRINT DATE OF SERVICE

The papers were delivered [CHECK ONE]

☐ **by handing it to the other party**

☐ **by first class mail to:**

_____
PRINT NAME OF PERSON SERVED WITH PAPERS

_____
STREET ADDRESS CITY, STATE AND ZIP CODE

☐ **by fax to:**

_____
PRINT NAME OF PERSON SERVED WITH PAPERS

_____
FAX NUMBER

☐ **by leaving a copy at the other party's workplace** with a clerk or person in charge, or because there was no one in charge, by leaving it in a conspicuous place:

_____
PRINT NAME OF PERSON SERVED WITH PAPERS

_____
STREET ADDRESS CITY, STATE AND ZIP CODE

☐ **by leaving a copy at the other party's home** with a person of suitable age and discretion who lives there:

_____
PRINT NAME OF PERSON SERVED WITH PAPERS

_____
STREET ADDRESS CITY, STATE AND ZIP CODE

_____ _____
SIGN YOUR NAME DATE

SUPERIOR COURT OF THE DISTRICT OF COLUMBIA
FAMILY COURT

_____,	:	
	:	
Plaintiff,	:	**Case No: _____**
	:	
v.	:	**Judge: _____**
	:	
_____,	:	
	:	
Defendant.		

ORDER

Upon consideration of the Motion to _____ filed by the Plaintiff/Defendant and any opposition thereto, it is, this _____ day of _____, 20___, HEREBY

ORDERED, that the Motion is granted; and it is further

ORDERED, that

_____
JUDGE

cc:

_____
Plaintiff's name

_____
Plaintiff's address

_____

_____
Defendant's name

_____
Defendant's address

_____