

MOTION FOR CONTINUANCE

JD-CV-21 Rev. 5-15
C.G.S. § 52-196
P.B. §§ 14-23, 14-24

ADA NOTICE

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at www.jud.ct.gov/ADA.

STATE OF CONNECTICUT
SUPERIOR COURT
www.jud.ct.gov

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MFCSE



Instructions To Person Making Motion

Fill out all sections of this form except the Order section and file it with the Clerk of the Court at least three (3) days before the date of the scheduled event.

Docket number _____

Name of case (Full name of Plaintiff v. Full name of Defendant) _____

Judicial District Housing Session Geographical Area Number _____ Address of Court (Number, street, town and zip code) _____

Date of Motion _____ Sequence Number on Short Calendar (If applicable) _____ Name of Judge Who Scheduled the Event this Continuance is Requested for (If applicable) _____

Date of Scheduled Event _____ Person Making Motion is:
 Plaintiff's Attorney Plaintiff Defendant's Attorney Defendant Other _____

Firm Name, if Applicable _____ Address _____ Phone Number (with area code) _____

Event For Which Continuance Is Requested: ("X" applicable box(es) and explain below)

- Arbitration
- Administrative Appeal Hearing
- Attorney Trial Referee Proceeding
- Court Trial
- Judicial-Alternative Dispute Resolution (J-ADR)
- Early Intervention Conference
- Fact-Finding
- Foreclosure Mediation
- Jury Trial
- Hearing In Damages
- Pretrial
- Status Conference
- Trial Management Conference
- Other

Reason(s) For Continuance Request: ("X" reason(s) and provide an explanation)

- Counsel not ready _____
- Lay witness not available (Name of witness) _____
- Counsel not available _____
- Party not available (Name of party) _____
- Expert witness not available (Name of witness) _____
- Discovery not complete _____
- Other _____

Continue explanation, if necessary:

For the above reason(s), I request this case be continued to (date): _____ or at the court's discretion.

I have contacted all counsel and self-represented parties of record about my intention to seek a continuance. All of the counsel and self-represented parties:

Consent Do Not Consent Have not responded to the above motion for continuance and requested continuance date.

Note: An agreement to continue a matter does not mean that the motion will automatically be granted by the court.

I agree to be responsible for notifying my client, if applicable, and all counsel of record and self-represented parties whether the continuance is granted or denied, and if granted, the new date of the scheduled event.

Certification

I certify that a copy of this document was mailed or delivered electronically or non-electronically on (date) _____ to all attorneys and self-represented parties of record and that written consent for electronic delivery was received from all attorneys and self-represented parties receiving electronic delivery.

Name and address of each party and attorney that copy was mailed or delivered to* _____

Signed (Signature of filer) _____ Print or type name of person signing _____ Date signed _____

Mailing address (Number, street, town, state and zip code) _____ Telephone number _____

Order Motion For Continuance is: Granted Denied Matter Continued To: _____ Signed (Judge) _____ Date _____

*If necessary, attach additional sheet or sheets with name and address which the copy was mailed or delivered to.