

INSTRUCTIONS: MOTION FOR CONTINUANCE

DISCLAIMER

IT IS STRONGLY RECOMMENDED THAT YOU CONSULT AN ATTORNEY

THE CLEARFIELD COUNTY COURTHOUSE STAFF ARE NOT PERMITTED TO GIVE YOU LEGAL ADVICE OR HELP IN FILLING OUT OR COMPLETING ANY LEGAL FORMS THAT MAY BE AVAILABLE. THE INFORMATION PROVIDED IN THE FOLLOWING FORM IS NOT A SUBSTITUTE FOR PROFESSIONAL LEGAL ADVICE. THE COURT ASSUMES NO RESPONSIBILITY AND ACCEPTS NO LIABILITY FOR ACTIONS TAKEN BY USERS OF THIS DOCUMENT, INCLUDING RELIANCE ON ITS' CONTENTS.

THIS MOTION FOR CONTINUANCE FORM SHOULD ONLY BE USED FOR CIVIL OR FAMILY MATTERS THAT ARE FILED IN THE PROTHONOTARY'S OFFICE.

DO NOT FILL ANY OF THE CHECK BOXES OR THE BLANK LINES ON THE 'ORDER' PAGE.

1. On the Motion for Continuance, complete the case caption (plaintiff and defendant) EXACTLY as it appears on other filings for this case and fill in the docket number.
2. In paragraph 2, state in detail why you are requesting a continuance and why you need to have this matter rescheduled.
3. To answer paragraph 3, you must contact the attorney for the other party or the 'pro se' party (any named party in the case who does not have an attorney of record) and inquire as to whether they will agree to a continuance. You then check the appropriate box.
4. You **must** sign your name and the date and include your current address and telephone number.

File an **original and two (2) copies** of this Motion for Continuance with the Prothonotary's Office which is located on the first floor of the Clearfield County Courthouse.

IN THE COURT OF COMMON PLEAS, CLEARFIELD COUNTY, PENNSYLVANIA
CIVIL DIVISION

vs. Plaintiff(s) NO. _____ - _____ -CD

Defendant(s)

MOTION FOR CONTINUANCE

AND NOW COMES _____ who files this Motion for Continuance and
(Your Name)
alleges as follows:

1. A (circle one) HEARING or CONFERENCE is scheduled on _____

2. I request that the (circle one) HEARING or CONFERENCE be continued and rescheduled
for the following reasons: _____

3. **As required**, I have contacted the opposing counsel or self-represented [pro-se] party(s) and they
- Agree to the continuance.
 - Do not agree to the continuance.
 - I have not been able to reach the opposing counsel or pro se party.

Wherefore, I request the court to grant this motion for continuance and reschedule the matter.

VERIFICATION

I verify that the statements made in the Motion for Continuance are true and correct.

I understand that false statements herein are made subject to the penalties of 18 Pa.C.S. § 4904
relating to unsworn falsification to authorities.

DATE

SIGNATURE

CURRENT ADDRESS _____

TELEPHONE NO. _____

IN THE COURT OF COMMON PLEAS OF CLEARFIELD COUNTY, PENNSYLVANIA
CIVIL DIVISION

Plaintiff(s)
vs. _____
Defendant(s)

NO. _____-_____-CD

CERTIFICATE OF SERVICE*

AND NOW, on the date stated below, I, _____,
hereby certify that I this day served the foregoing ***'Motion for Continuance'*** and
'Scheduling Order' by:

____ Personally hand delivering to the (opposing party) (opposing attorney) at this
address: _____

____ Depositing a copy of the same via United States mail, first class, postage prepaid,
at _____
(name of post office),

____ Hiring Constable _____, who has provided me with proof
of service (see attached)

The document(s) were addressed to the following:

(Name)

(Street / PO Box)

(City / State)

DATE

SIGNATURE

* *Document must be signed, dated, and filed with the Prothonotary.*

** *Green 'Return Receipt' card, with recipient's signature, must be attached to this document.*