

**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](http://www.jud.ct.gov/ADA).

STATE OF CONNECTICUT  
**SUPERIOR COURT**  
[www.jud.ct.gov](http://www.jud.ct.gov)

COURT USE ONLY

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

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

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

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.