IN THE COURT OF COMMON PLEAS OF DELAWARE COUNTY, PENNSYLVANIA

OFFICE OF THE COURT ADMINISTRATOR

Application for Continuance

For Electronic Filing only
v. : No
PLEASE CHECK ALL BOXES THAT APPLY
\Box I have contacted all represented/self-represented parties who \Box Approve of this continuance.
This continuance requested by: \Box Attorney for Plaintiff \Box Self-Represented Plaintiff \Box Attorney for Defendant \Box Self-Represented Defendant
□ This continuance is opposed by: □ Attorney for Plaintiff □ Self-Represented Plaintiff □ Attorney for Defendant □ Self-Represented Defendant
I, the undersigned, do hereby request the Court to grant a continuance in the above referenced case and agree to the new date and time. I certify that upon receipt of this application from the Court, I will notify all represented/self-represented parties of the new hearing date and time.
Name: Signature:
FOR OFFICIAL USE ONLY
New Hearing Date: Time: 🗆 AM 🗆 PM
□ MUST BE TRIED – No further continuances unless granted by Judge
The Office of the Court Administrator recommends: 🛛 Approval 🗍 Disapproval
Name: Date:
Disapproved because:
Application for Continuance is: Approved Disapproved
Judge: Date: Date:
Disapproved because: