



**State Office of Administrative Hearings**

P.O. Box 13025, Austin, Texas 78711-3025

Phone 512.475.4993

## Motion for Continuance by Self-Represented Litigant

Case Name:

§ Driver's License (ALR) Case Number:

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\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Email Address

Address:

\_\_\_\_\_  
Street Name

\_\_\_\_\_  
City

\_\_\_\_\_  
State

\_\_\_\_\_  
Zip

\_\_\_\_\_  
Current Hearing Date

\_\_\_\_\_  
Current Hearing Time

\_\_\_\_\_  
Hearing Location

1. I am unable to attend the hearing on the scheduled date and time because:

2. I learned these facts on the following date: \_\_\_\_\_

3. I contacted \_\_\_\_\_, who is the other party to the hearing or the other party's attorney.

4. The other party:

**DOES NOT OPPOSE** the continuance.

**OPPOSES** the continuance.

**WAS NOT AVAILABLE** to discuss the request.

5. Both parties are available for rescheduling as follows (three available dates and times must be included):

\_\_\_\_\_  
Proposed Hearing Date One

\_\_\_\_\_  
Proposed Hearing Time One

\_\_\_\_\_  
Proposed Hearing Date Two

\_\_\_\_\_  
Proposed Hearing Time Two

\_\_\_\_\_  
Proposed Hearing Date Three

\_\_\_\_\_  
Proposed Hearing Time Three

I understand that the judge may grant or deny the request, regardless of whether both parties agree to a continuance, and the judge may not be able to reschedule the case for any of the dates I requested.

I certify that on this date I served a copy of the Motion for Continuance to the opposing party by the following means:

- First Class Mail
- Fax
- Email

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Signature

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Date