



State Office of Administrative Hearings

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

Phone 512.475.4993 | Fax 512.522.5263

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

Virtual Hearing Room Number (this is found in the Virtual Hearing Password and will read as ALRVHR*** with the asterisks representing the hearing room number for your hearing)

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 DPS attorney assigned to my case.

4. The DPS attorney:

- ☐ **DOES NOT OPPOSE** the continuance.
- ☐ **OPPOSES** the continuance.
- ☐ **WAS NOT AVAILABLE** to discuss the request.

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 a specifically requested date if one was provided.

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

Signature

Date