



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:

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§
§
§
§
§
§

SOAH Docket Number:

Printed Name

Email Address

Mailing Address

City

State

Zip Code

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 _____(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 motion.

OPPOSES the motion.

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 to Set Aside Default to the DPS attorney by the following means:

First Class Mail

Fax

Email

Signature

Date