

**IN THE COURT OF COMMON PLEAS OF ALLEGHENY COUNTY, PENNSYLVANIA
FAMILY DIVISION**

_____Petitioner

v.

FD: _____

_____Respondent

CONSENT CONTINUANCE FORM: PARTIAL CUSTODY HEARING

1. The above-captioned case participants hereby consent to continue the Partial Custody Hearing scheduled before the Custody Hearing Officer on _____ (insert scheduled hearing date), which is scheduled to occur at least five (5) days from today's date.
2. The parties are desirous of additional time to compete and file Pre-Trial Statements and/or secure/confer/prepare with counsel.
3. The parties understand that this continuance request will NOT be processed if both parties do not consent by signature below and/or if the hearing is an interim relief hearing and/or if the form is not completed in full.
4. The parties understand and agree that if processed, this case will be rescheduled to the next available date on the Hearing Officer calendar, after the original scheduled date, to occur no sooner than fifteen (15) days from the original date and notice will be served by email according to the addresses provided below. Parties may only consent to one (1) continuance. Further continuances must be granted by the assigned Judge.

Petitioner's signature _____

Counsel signature _____

Email address _____

Email address _____

Respondent's signature _____

Counsel signature _____

Email address. _____

Email address _____

Date: _____

This form shall be submitted to the Custody Department by email at: custodydepartment@allegheycourts.us with a courtesy copy to the Hearing Officer (EmergencyBiasca@allegheycourts.us or EmergencyValles@allegheycourts.us)