|  |  |  |  |
| --- | --- | --- | --- |
|  |  *ONTARIO* |  | Court File Number |
| Superior Court of Justice, Family Court |  |
| *(Name of Court)* |  |
| **at** | 55 Main Street West, Hamilton, Ontario |  |
| *(Court office address)* | **Consent Request: Adjournment of Case Management Date Without Attendance****(fewer than 30 days notice to court)** |
|  |  |
| Applicant(s) |
| Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e‑mail address (if any). | Lawyer’s name & address — street & number, municipality, postal code, telephone & fax numbers and e‑mail address (if any). |
|  |  |
| Respondent(s) |
| Full legal name & address for service — street & number, municipality, postal code, telephone & fax numbers and e‑mail address (if any). | Lawyer’s name & address — street & number, municipality, postal code, telephone & fax numbers and e‑mail address (if any). |
|  |  |

**Children’s Lawyer**

|  |
| --- |
| Name & address of Children’s Lawyer’s agent for service (street & number, municipality, postal code, telephone & fax numbers and e-mail address (if any)) and name of person represented. |
|  |

**CONSENT REQUEST TO ADJOURN CASE MANAGEMENT DATE WITHOUT ATTENDANCE**

**Note: Requests for an adjournment of a case management date may be made through the Office of the Trial Coordinator without judicial authorization, if the request is made at least 30 days prior to the court attendance. Use of this form is not required for such requests.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

All interested parties in this action jointly request an adjournment of the following upcoming case management conference:

 □ DRO Conference □ Case Conference

 □ Settlement Conference □ Trial Scheduling Conference

 To be held on:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Before Justice:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Without necessity of court attendance because:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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If this request is granted, we agree to reschedule the conference on a mutually agreeable date through Office of the Trial Coordinator, if, and when, ready to proceed.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signature of Applicant or Agent

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

Date Signature of Respondent or Agent

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Signature of Other Interested Party or Agent

*TO BE COMPLETED BY COURT:*

□ Request Approved

□ Request Denied \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Judge