**Superior Court of Washington, County of**

**Juvenile Court**

|  |  |
| --- | --- |
| Dependency of: D.O.B.:  | **No**: **Order on Motion to Continue Fact-Finding** [ ] Granted (ORCNTFF)[ ] Denied (ORDYFFC)**Clerk’s Action Required**: **2.2** and **3.1**( [ ] DEX [ ] IEX [ ] CEX [ ] PEX[ ] LEX [ ] EEX [ ] OEX ) |

**I. Basis**

**1.1** This matter is before the court on an [ ] Agreed [ ] Contested Motion for Continuance of the Fact-Finding hearing filed by:

[ ] DCYF [ ] Parent 1 [ ] Parent 2 [ ] GAL/CASA/Advocate [ ] Child

[ ] Other:

**1.2** The following parties objected to the continuance:

[ ] DCYF [ ] Parent 1 [ ] Parent 2 [ ] GAL/CASA/Advocate [ ] Child

[ ] Other:

**II. Findings**

**2.1** The above [ ] has shown [ ] has not shown good cause for a continuance of the Fact-Finding hearing within 75 days of the filing of the dependency petition scheduled on: (Date) at a.m./p.m.

**2.2** Exceptional circumstances exist to continue the Fact-Finding hearing on the dependency petition to a date later than 75 days after the filing of the petition, due to the following: *(please choose only one)*

[ ] Discovery related circumstance. (DEX)

[ ] ICWA related circumstance. (IEX)

[ ] Court availability, calendaring, courtroom congestion, or judicial resources. (CEX)

[ ] Party availability: a party to the case is unavailable for trial or fact finding by the 75th day. (PEX)

Party who is unavailable:

[ ] Lawyer availability: a lawyer involved in the case is unavailable for trial or fact finding by the 75th day. (LEX)

Lawyer who is unavailable:

[ ] Pre-Dependency engagement; parent voluntarily engaging. (EEX)

[ ] Other, General Compelling Reason . (OEX)

**2.3** The facts supporting the finding(s) in section **2.2** are set forth in the motion and as follows:

**2.4** Other:

**III. Order**

**IT IS ORDERED:**

**3.1 Continuance**

[ ] The motion to continue is denied.

[ ] The Fact-Finding hearing is continued.

**Go to court on:**  at [ ] a.m. [ ] p.m.

*date time*

at: in

*court’s address room or department*

*docket/calendar or judge/commissioner’s name*

Zoom Hearing: https://zoom.us/join. Meeting ID #

or call in 1-253-215-8782 meeting ID #

**3.2** Other:

Dated:

 **Judge/Commissioner**

Presented by:

Signature Print Name/Title WSBA No.

Copy Received. Approved for entry, notice of presentation waived.

Signature of **Child** [ ] Signature of Child’s Lawyer

 Print Name WSBA No.

[ ] Signature of **Parent 1** [ ] Signature of Parent 1’s Lawyer

[ ] Pro Se, Advised of Right to Counsel

 Print Name WSBA No.

[ ] Signature of **Parent 2** [ ] Signature of Parent 2’s Lawyer

[ ] Pro Se, Advised of Right to Counsel

 Print Name WSBA No.

[ ] Signature of **Guardian or Legal Custodian** [ ] Signature of Guardian or Legal Custodian’s Lawyer

[ ] Pro Se, Advised of Right to Counsel

 Print Name WSBA No.

[ ] Signature of Child’s **GAL** [ ] Signature of Lawyer for the Child’s GAL

Print Name Print Name WSBA No.

Signature of **DCYF Representative** Signature of DCYF Representative’s Lawyer

Print Name Print Name WSBA No.

[ ] Signature of **Tribal Representative** [ ] Signature of Tribal Representative’s Lawyer

Print Name Print Name WSBA No.

 Lawyer for