

SHAKER HEIGHTS MUNICIPAL COURT

REQUEST FOR CONTINUANCE OF ARRAIGNMENT

I understand I have a right to a speedy trial, to be held within (90) days from the date of my initial appearance for a misdemeanor charge, and I hereby waive the right and request a continuance until a date to be set by the Shaker Heights Municipal Court. I herein knowingly and voluntarily waive any and all rights to trial being had within the time limitation under the Constitution of the United States, the Ohio Revised Code and the Ohio Rules of Criminal Procedures.

Yes (____) No (____)

REQUEST CONTINUANCE OF APPEARANCE OTHER THAN ARRAIGNMENT

FAILURE TO COMPLETE SECTION BELOW IN FULL WILL RESULT IN YOUR APPLICATION BEING DENIED

TICKET OR CASE NUMBER: _____

DEFENDANT INFORMATION: (Print Only)

NAME _____

ADDRESS _____

PHONE NO. _____

REASON FOR CONTINUANCE _____

I will immediately serve a copy of this request to the prosecutor for the City/Village of:

- Shaker Heights
- University Heights
- Beachwood

- Pepper Pike
- Hunting Valley

SIGNATURE: _____

DATE: _____