VIRGINIA: IN THE CIRCUIT COURT OF FAUQUIER COUNTY

_____

v. Case No._____

_____

CALENDAR CONTROL REQUEST FORM

Calendar Control Date:_____ ***(Clerk must receive this completed form no later than noon on the business day before the Calendar Control date. All motions must be filed with the Clerk simultaneously with or prior to submitting this Calendar Control Request Form)***

Motion:

A. ____ Schedule the following motion alleged to be an emergency:

_____

B. ____ Request a continuance

C. ____ Schedule the following criminal case motion requiring in-person testimony:

_____

D. ____ Schedule a bond motion / bond appeal

E. ____ Schedule a civil trial

Certification

I hereby certify that: (a) if attempting to schedule a motion alleged to be an emergency, I made a good faith attempt to contact the opposing party/counsel and join them in the Calendar Control telephone call; (b) as to motions B through E above, all parties entitled to notice (i) will be participating in the Calendar Control telephone call, or (ii) [for active members in good standing of the Virginia State Bar] I have obtained permission from all parties entitled to notice to convey their position and views to the Court.

Signature:_____

Name (print):_____

Email Address:_____

Tel. Number:_____

VSB No._____