

<b>Incarcerated Individual Name:</b>	<b>OID:</b>
<b>Facility:</b> Select A Facility	<b>Living Unit/Cell:</b>

## Request for Continuance of Discipline Hearing

**I request a continuance of the following discipline report:**

<b>Report #:</b>	<b>Date of Incident:</b>
<b>Reporting Officer(s):</b>	

**Reasons for continuance:**

- To obtain representation
- To prepare defense
- Other \_\_\_\_\_

**I realize this request must be received by the Discipline Unit by noon one working day prior to the scheduled hearing.**

**Incarcerated Individual Signature:** \_\_\_\_\_

Received in Discipline:

**Date:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**Discipline Staff Initials:** \_\_\_\_\_

**Discipline Staff Printed Name:** \_\_\_\_\_