The Family Court of the State of Delaware

In and For  New Castle County  Kent County  Sussex County

**MOTION AND AFFIDAVIT FOR PRIORITY SCHEDULING**

**Petition for**

## Petitioner v. Respondent

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Name |  | Name |  | File Number |
|  |  |  |  |  |
| Street Address (including Apt) |  | Street Address (including Apt) |  |  |
|  |  |  |  |  |
| P.O. Box Number |  | P.O. Box Number |  |  |
|  |  |  |  | Petition Number |
| City/State/Zip Code |  | City/State/Zip Code |  |  |
|  |  |  |  |  |
| Attorney Name |  | Attorney Name |  |  |
|  |  |  |  |  |
| Interpreter needed?  Yes  No |  | Interpreter needed?  Yes  No |  | |
| Language |  | Language |  | |

|  |  |
| --- | --- |
| **Section I** | |
| I, the undersigned affiant, being duly sworn according to law, | |
|  | Do hereby request that my Petition be treated on an expedited, priority basis. |
|  | Do hereby attest to the truth of the allegations made in the attached petition. I request the following relief: |
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| **Section II** | |
| I further swear that unless relief is granted prior to a normally scheduled hearing on the merits, the following | |
| substantial and irreparable harm will result: | |
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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | Movant | | | | | | | |
| Sworn to subscribed before me this |  | day of | |  | , |  | | |  | |
|  | | | | | | | | | | |
|  | | | Clerk of Court/Notary Public | | | |  | Date | |  |

**AFFIDAVIT OF MAILING**

|  |  |  |
| --- | --- | --- |
| I, the Movant, affirm that a true and correct copy of this Motion was placed in the U.S. Mail on the day of and sent to the other party or attorney at the address listed on the petition, first class postage pre-paid. | | |
|  | Movant |  |
| Sworn to subscribed before me this \_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_\_ | | |
|  | |  |
|  | Clerk of Court/ Notary Public |  |