

Oneida Family Court  
P O Box 19  
Oneida, WI 54155  
(920) 496-7200

### **INSTRUCTIONS FOR FILING A MOTION TO EXTEND CONSENT DECREE**

1. Complete and sign the Motion to Extend Consent Decree.
2. Send a copy of the completed and signed motion to the other parties involved by first-class mail.
3. File the original motion form, your proof of service, and pay the \$25.00 filing fee with the Clerk (or request a fee waiver). **PLEASE NOTE: The court will not accept your motion without the proof of service and the filing fee.**
4. Unless the parties have attached a stipulated agreement, the other parties have 14 days to respond to your motion in writing. The court may also allow the parties to respond orally at the hearing.
5. Unless the parties have attached a stipulated agreement, a hearing will be scheduled after 14 days have passed from the date of your filing.

**Any questions, call the Clerk of Court at (920) 496-7200.**

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**ONEIDA FAMILY COURT**

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**IN THE INTEREST OF:**

\_\_\_\_\_  
Name

Case No. \_\_\_\_\_

\_\_\_\_\_  
Date of Birth

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**Motion to Extend Consent Decree**

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Child's Address and Telephone Number	
Parent 1's Name, Address, and Telephone Number	Date of Birth
Parent 2's Name Address, and Telephone Number	Date of Birth
Legal Custodian or Guardian's Name, Address, and Telephone Number	
Current Caregiver's Name, Address, and Telephone Number	

**I REQUEST THE COURT:**

1. Extend the Consent Decree that is set to expire on [Date] \_\_\_\_\_.
2. I request that the Consent Decree be extended for an additional [*up to six (6) months*]  
\_\_\_\_\_ for the following reasons: \_\_\_\_\_  
 See attached

**If you do not object, the Consent Decree may be extended without a court hearing. If you object to the extension, a written objection must be filed with the Family Court within ten (10) days of the filing of this request. If you file a written objection, a hearing will be scheduled.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Name Printed or Typed

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**CERTIFICATE OF SERVICE BY MAIL**

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The undersigned, being first duly sworn on oath, certifies and says that he or she is a party in the above referenced matter and that on the date stated he or she did deposit a true and correct copy of the papers described below, properly enclosed in a postpaid envelope bearing sender's name and address, and addressed to the following person(s) at their proper post office address(es) as indicated.

Date Mailed: \_\_\_\_\_, 20\_\_\_\_

Documents: **Motion to Extend Consent Decree**

TO: Name  
Street Address  
City, State and Zip

Name  
Street Address  
City, State and Zip

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print name