

STATE OF SOUTH CAROLINA)
)
COUNTY OF _____)
)
)
)

) Plaintiff,
)
) vs.)
)
)
)

) Defendant.)

IN THE FAMILY COURT
____JUDICIAL CIRCUIT

**REQUEST FOR HEARING
FOR DIVORCE**
(One Year Continuous Separation)

Docket No. _____

Plaintiff or Attorney for Plaintiff:
Address:

Telephone: Home: _____
Cell: _____
Other: _____

Email: _____

Defendant or Attorney for Defendant:
Address:

Telephone: Home: _____
Cell: _____
Other: _____

Email: _____

Contested: **No** Child Custody Issue: **No**

GROUND FOR DIVORCE: Continuous Separation for One (1) Year

Amount of Time Requested: **15 Minutes**

Dates / Times the Plaintiff and/or Defendant is/are UNAVAILABLE (exclude weekends and holidays): See Attached list(s)

Hearing Requested By: PLAINTIFF DEFENDANT

COMMENTS / ISSUES: _____

Date: _____, 20____.
_____, S.C. Signature

******Section below to be completed by Clerk of Court. ******

The Final Hearing in this matter is scheduled for ____ day of _____ 20____, at
____:____ a.m./ p.m., Courtroom _____, before the Honorable