

ATTORNEY OR PARTY WITHOUT ATTORNEY (<i>Name, State Bar number, and address</i>) TELEPHONE NO.: _____ FAX NO. (<i>Optional</i>): _____ E-MAIL ADDRESS (<i>Optional</i>): _____ ATTORNEY FOR (<i>Name</i>): _____	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, ALAMEDA COUNTY STREET ADDRESS: _____ MAILING ADDRESS: _____ CITY AND ZIP CODE: _____ BRANCH NAME: _____	
PETITIONER/PLAINTIFF: _____ RESPONDENT/DEFENDANT: _____ OTHER: _____	
APPLICATION AND ORDER FOR CONTINUANCE OF <input type="checkbox"/> Hearing <input type="checkbox"/> Status Conference <input type="checkbox"/> Case Resolution Conference	CASE NUMBER: _____

1. The parties request the hearing status conference case resolution conference set in Dept.: _____ date: _____ time: _____
 be: continued in that department to (date): _____ at (time): _____
 dropped.

2. The courtroom clerk has indicated that the date requested is available.

3. The hearing or conference has been continued _____ times in the past. The reason for the request is (specify):

4. The parties agree that any existing temporary order previously issued by the court at the time of the filing of this application, except orders issued under the Domestic Violence Prevention Act (DVPA)(Family Code § 6300 et seq.), shall remain in effect until the next hearing is held. The parties acknowledge that temporary orders issued under the DVPA will not remain in effect beyond the date they are set to expire unless they are extended by a reissuance of the orders. An application for reissuance of temporary orders under the DVPA (form DV-115), if requested, is separately submitted.

5. The parties agree that if this request is granted, Petitioner Respondent Other Parent Other (*specify*): _____ shall pay any required continuance fee within ten days of the date this form is mailed or faxed to the court, when this application and order is filed if it is filed in person, or before the hearing or conference is held, whichever is earliest.

ALL PARTIES MUST SIGN THIS FORM BEFORE IT IS FILED WITH THE COURT.

Date: _____ _____ <input type="checkbox"/> ATTORNEY FOR <input type="checkbox"/> PETITIONER <input type="checkbox"/> RESPONDENT <input type="checkbox"/> OTHER PARENT <input type="checkbox"/> OTHER	Date: _____ _____ <input type="checkbox"/> ATTORNEY FOR <input type="checkbox"/> PETITIONER <input type="checkbox"/> RESPONDENT <input type="checkbox"/> OTHER PARENT <input type="checkbox"/> OTHER
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Date: _____ _____ <input type="checkbox"/> ATTORNEY FOR <input type="checkbox"/> PETITIONER <input type="checkbox"/> RESPONDENT <input type="checkbox"/> OTHER PARENT <input type="checkbox"/> OTHER	Date: _____ _____ <input type="checkbox"/> ATTORNEY FOR <input type="checkbox"/> PETITIONER <input type="checkbox"/> RESPONDENT <input type="checkbox"/> OTHER PARENT <input type="checkbox"/> OTHER
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The application is **DENIED** for continuance of the hearing status conference case resolution conference. **ALL PARTIES AND THEIR ATTORNEYS MUST APPEAR IN COURT AS PREVIOUSLY ORDERED.**

The application is **GRANTED** for continuance of the hearing status conference case resolution conference. The matter is continued to the date and time requested, with temporary orders other than those issued under the Domestic Violence Prevention Act continued to the same date and time, or is dropped as requested.

Date: _____ (JUDICIAL OFFICER)