

SUPERIOR COURT OF CALIFORNIA, COUNTY OF RIVERSIDE

- BANNING** 311 E. Ramsey St., Banning CA 92220
- BLYTHE** 265 N. Broadway, Blythe, CA 92225
- INDIO** 46-200 Oasis St., Indio, CA 92201

- MURRIETA** 30755-D Auld Rd., Ste. 1226, Murrieta, CA 92563
- RIVERSIDE** 4100 Main St., Riverside CA 92501

RI-CR011

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number and Address) TELEPHONE NO.: _____ FAX NO. (Optional): _____ E-MAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY
PEOPLE OF THE STATE OF CALIFORNIA vs. IN THE MATTER OF (Name of Supervised Person): _____	CASE NUMBER: (PRCS) RIR (PAROLE) RPR

REQUEST FOR CONTINUANCE
(Petition for Revocation of Post Release Community Supervision Parole Supervision)

Instructions: Parties may file Request for Continuance form in the courtroom where a new law violation is assigned, or in the Hall of Justice Clerk's Office at least 5 court days before the Revocation Hearing date for chambers work review and order by the designated Revocation Hearing Officer.

Supervised Person Present [DPR] Not Present [DNP]

Hearing Information: A formal hearing on the Petition for Revocation of Post Release Community Supervision

Parole Supervision filed on _____ has been scheduled as follows:

Date: _____ Time: _____ Location: Hall of Justice – Department 45

Continuance is at the request of: Petitioner/District Attorney Supervised Person/Defense Counsel

By Stipulation [PCSCR]

Moving Party(s) requests the following event be continued to the following date:

Revocation Hearing on _____ Time: 8:30 A.M. Location: Hall of Justice Department 45. [HPRCS, HPS]
 (THURSDAY)

Note: Formal hearing on a petition for revocation must occur within a reasonable time after the filing of the petition – CRC 4.540(g)(f).

Supervised person remains out of custody [RRPCS] Supervised person remains in custody – Bail set at \$ NO BAIL [RRTC, BSA]

The reason for this request is as follows:

New law violation – Case Number: _____ pending disposition [RRNLV]

Other: _____

Date: _____ (NAME AND TITLE OF SUPERVISING AGENCY) By: _____ (SIGNATURE)

Date: _____ (NAME AND TITLE OF DISTRICT ATTORNEY) By: _____ (SIGNATURE)

Date: _____ (NAME AND TITLE OF DEFENSE COUNSEL) By: _____ (SIGNATURE)

Date: _____ (NAME OF SUPERVISED PERSON) By: _____ (SIGNATURE)

ORDER OF THE COURT:

- Request for Continuance GRANTED (Good cause having been shown) [CFGCS]
- Request for Continuance DENIED (Good causing NOT having been shown) [CFNGCS]

Reason(s): _____

Supervised person ordered to return to any and all future hearing dates. Petitioner to provide notice to the District Attorney and the supervised person's counsel or, if unrepresented, the supervised person.

Dated: _____ (REVOCATION HEARING OFFICER OR JUDGE OF THE SUPERIOR COURT)