

**IN THE COURT OF COMMON PLEAS OF LEHIGH COUNTY, PENNSYLVANIA
APPLICATION FOR CONTINUANCE – FAMILY CASE**

INSTRUCTIONS:

1. Complete Sections I through IV legibly.
2. Submit completed Application to Family Court Administration by e-filing it through the Lehigh County Odyssey E-filing System at <https://pennsylvania.tylercloud.com/ofsweb>. For Protection From Abuse cases, email the completed Application to familycourtoffice@lehighcounty.org, or fax to 610.782.3866.

NOTICE: Protection From Abuse Cases – Provisions of the Preliminary Order remain in effect until final disposition or for thirty-six (36) months from the date of the Preliminary Order, whichever occurs first. Custody Cases – The applying party and any non-opposing party are deemed to waive applicable provisions of Pa. Rules of Procedure relating to time standards for custody cases for any period covered by the granting of this continuance.

I. CASE:

)	
Plaintiff)	Case No.
v.)	
)	
Defendant)	

PROCEEDING SCHEDULED ON: DATE/TIME _____ JUDGE/ HEARING OFFICER _____

TYPE OF PROCEEDING:

- | | |
|--|--|
| <input type="checkbox"/> PROTECTION FROM ABUSE HEARING | <input type="checkbox"/> CUSTODY CONFERENCE BEFORE HEARING OFFICER |
| <input type="checkbox"/> HEARING | <input type="checkbox"/> CUSTODY PRE-TRIAL CONFERENCE |
| <input type="checkbox"/> ARGUMENT | <input type="checkbox"/> CUSTODY TRIAL |

II. NUMBER OF PREVIOUS CONTINUANCES: BY PLAINTIFF _____ BY DEFENDANT _____

III. APPLICATION IS MADE FOR THE FOLLOWING REASON(S):

APPLYING PARTY: PRINT AND SIGN _____ DATE _____ REPRESENTING _____
Telephone: _____ Fax No./Email: _____

IV. APPLICATION IS ☐ UNOPPOSED ☐ OPPOSED FOR THE FOLLOWING REASON(S):

OPPOSING PARTY: PRINT AND SIGN _____ DATE _____ REPRESENTING _____
Telephone: _____ Fax No./Email: _____

FOR COURT USE ONLY

V. ORDER: AND NOW, _____; IT IS ORDERED that the Application is

- | | |
|--|--|
| <input type="checkbox"/> GRANTED AND THE CASE IS CONTINUED | <input type="checkbox"/> DENIED |
| <input type="checkbox"/> GENERALLY | <input type="checkbox"/> NO FURTHER CONTINUANCES |
| <input type="checkbox"/> NEXT AVAILABLE LIST | |
| <input type="checkbox"/> TO _____ | |
| DATE | TIME |
| COURTROOM | |

BY THE COURT: _____

Hearing Officer/Judge