APPLICATION FOR TRIAL CONTINUANCE

I. Application is hereby made to continue the following case:

COMMONWEALTH OF PENNSYLVANIA	)	No. _____CRIMINAL SESSIONS, _____
	)	
VS.	)	
	)	
	)	

II. The application is made for the following reason(s):

_____ _____ _____

Signature of applying counsel Date Representing

III. Application is opposed/not opposed for the following reason(s):

_____ _____ _____

Signature of other counsel Date Representing

IV: I am aware and have been advised of the implications and consequences of the above application and have/do not have objection to the continuance. I am further aware of my right to a speedy trial and that a continuance shall cause a delay in having said criminal charges disposed of by the Court.

_____ _____

Signature of Defendant Date

V. Action taken by the Court: Granted _____ Denied_____ Other Action (Explain)

Continued to:

ATTEST:

_____ _____

Clerk of Courts Judge