

CONFIDENTIAL

Attorney or Party Without Attorney Name: Street Address: City, State, Zip Code: Telephone Number: Attorney for (name):	State Bar Number:	FOR COURT USE ONLY
SUPERIOR COURT OF CALIFORNIA, COUNTY OF KERN <input type="checkbox"/> Metro Division 1415 Truxtun Avenue, Bakersfield, CA 93301 <input type="checkbox"/> Metro Justice Building 1215 Truxtun Avenue, Bakersfield, CA 93301		
DEFENDANT:		
EX PARTE HEARING REQUEST & ORDER PRE-TRIAL FELONY DIVERSION / TREATMENT (PC §1001.36, WIC §4361 and HS §11395)		CASE NUMBER:

Client Name:

Requested Hearing Date:

Hearing Time:

Department/Division:

BASIS FOR REQUESTED EX PARTE HEARING (Check all that apply):

- | | |
|--|---|
| <input type="checkbox"/> New Criminal Activity | <input type="checkbox"/> Change in Mental Status |
| <input type="checkbox"/> Treatment Non-Adherence | <input type="checkbox"/> Housing Instability |
| <input type="checkbox"/> Safety Concern | <input type="checkbox"/> Absconded / Lost Contact |
| <input type="checkbox"/> Behavioral Concerns | <input type="checkbox"/> Other |

EXPLANATION OF CONCERNS:

SUPPORTING DOCUMENTATION (Attached)

Findings & Order

Request Denied

Order Granted – Matter set for Ex Parte Hearing on (date): _____ at (time): _____
 in Division: _____, Metropolitan Justice Building at 1215 Truxtun Avenue, Bakersfield, CA 93301.

Dated:

 JUDGE OF THE SUPERIOR COURT