**RETURN THIS APPLICATION TO: Office of Court-Appointed Counsel, 223 Penn Street, Huntingdon, PA 16652**

**JUVENILE APPLICATION FOR PUBLIC DEFENDER**

**HEARING DATE:**   **TIME:**

**PLACE:**

IN THE COURT OF COMMON PLEAS OF HUNTINGDON COUNTY, PENNSYLVANIA

CRIMINAL DIVISION

COMMONWEALTH OF PENNSYLVANIA : NO: CP-31-JV-

: CHARGES:

vs. :

:

:

**cERTIFICATE FOR APPOINTMENT OF PUBLIC DEFENDER**

Now, on the within application, the Public Defender services in this case are approved.

FOR THE COURT OF COMMON PLEAS OF HUNTINGDON COUNTY

BY:

Frederick R. Gutshall, Chief Public Defender

DATE:

ASSIGNED:

**Please answer all of the following questions. Do not leave questions blank.**

Name of Juvenile: D/O/B:

Name and Relationship of Person Completing this form:

Juvenile’s Mailing Address:

City: State: Zip:

Phone numbers: ( ) ( )

Names and relationships of other persons living at this address:

has been accused of committing the following:

(Name of Juvenile/Defendant)

on the day of , .

Other participants charged or involved:

Please answer the following questions:

A. Does Juvenile have any independent income of any kind? (circle one) Yes No Please explain (i.e., job, bank account, trust)

B. Do you have any family or friends who would pay for an attorney in this matter?

(circle one) Yes No Who?

C. Do you attend school? (circle one) Public School Private Charter

Current grade level:

D. Are you married? (circle one) Yes No

Do you live with your spouse? (circle one) Yes No

Name and address of spouse:

E. Do you have any children? (circle one) Yes No

List name(s), age(s) and address(es) of child(ren):

NAME AGE ADDRESS

F. Do you pay support? (circle one) Yes No How much per month?

Do you receive support? (circle one) Yes No How much per month?

G. Have you been previously represented by an attorney? (circle one) Yes No

If yes, name of the attorney?

Was the attorney paid? (circle one) Yes No If so, by whom?

H. Are you currently on probation? (circle one) Yes No

If yes, what in county and state?

Probation Officer’s Name:

I. Are you a U.S. citizen? (circle one) Yes No

If you are not a U.S. citizen, immigration status?

WHEREFORE, I, the Petitioner, pray that the Honorable Court assign counsel to

represent me in the above-captioned criminal cause of action without fee.

X

**PLEASE READ CAREFULLY:**

**In signing this Application, I indicate that if counsel is appointed to represent me, I have a duty to inform him/her immediately of any change in my financial condition, income, and/or address.**

**I verify that the above information is true and correct to the best of my knowledge, information and belief. This verification is made subject to the penalties of Section 4904 of the Pennsylvania Crimes Code (Pa.C.S.A.§ 4904), relating to unsworn falsification to authorities.**

**X**