**CAUSE NO.**

|  |  |  |
| --- | --- | --- |
| **IN THE MATTER OF** | **§** | **IN THE COUNTY COURT** |
| **A CHILD** | **§** | **AT LAW NO. (** **) OF** |
|  | **§** | **FORT BEND COUNTY, TEXAS** |
|  | **§** | **SITTING AS A JUVENILE COURT** |

**FINANCIAL REPORT ON PARENTS’ ABILITY TO HIRE**

**AN ATTORNEY TO REPRESENT A JUVENILE RESPONDENT**

**AND THE JUVENILE IS NOT REPRESENTED BY COUNSEL**

If the juvenile is not represented by an attorney, the Juvenile Probation Officer in charge of the case shall complete this form and file with the Juvenile Judge as follows:

1, Name of attorney who has previously represented the child (if any):

**Previous Attorney:**

**(Check One)**

**Child in Detention.** The form shall be presented to the Juvenile Judge by 10:00 a.m. of the day the initial detention hearing is held.

**Child not in Detention.** The form shall be presented to the Juvenile Judge within ten (10) working days a petition is filed.

2. **List the names of person(s) who provided information and relationship to the juvenile:**

|  |  |
| --- | --- |
| **NAME** | **RELATIONSHIP** |
|  |  |
|  |  |
|  |  |
|  |  |

**Primary language spoken: English / Spanish / Other (List)**

**Other Language:**

**3. Information about the Juvenile:**

**A. Name:**

**Date of Birth:**

**Home Address:**

**City,State, Zip Code**

**Telephone Number:**

**B. Name of person(s) child resides with:**

|  |  |
| --- | --- |
| **NAME** | **RELATIONSHIP** |
|  |  |
|  |  |
|  |  |
|  |  |

**C. Offense(s) Alleged:**

**D. Possible type of hearing for the case based upon probable cause statement: (Check One)**

**CINS or Delinquent Conduct - T.J.J.D. not possible**

**Delinquent Conduct with Indeterminate sentence –T.J.J.D. possible**

**Determinate Sentence**

**Certification**

**Mental Competency**

**4. Information About Parents**

**A. Check One**

**Parents Together**

**Parents Separated**

**Parents Divorced**

**Other (explain):**

**B. Father:**

**Telephone Number(s): Home: (****) –** **-**

**Work: (     ) –       -**

**Cell: (     ) –       -**

**Place of Employment:**

**Occupation:**

**Approximate Monthly Salary: $**

**Government Financial Assistance:** **YES** **NO**

**C. Mother:**

**Telephone Number(s): Home: (     ) –       -**

**Work: (     ) –       -**

**Cell: (     ) –       -**

**Place of Employment:**

**Occupation:**

**Approximate Monthly Salary: $**

**Government Financial Assistance:** **YES** **NO**

**D. List income received per month from the following:**

**MOTHER FATHER**

|  |  |  |  |
| --- | --- | --- | --- |
| **1** | **Child Support** | **$** | **$** |
| **2** | **Welfare (Food Stamps)** | **$** | **$** |
| **3** | **Worker’s Compensation** | **$** | **$** |
| **4** | **Unemployment** | **$** | **$** |
| **5** | **Disability** | **$** | **$** |
| **6** | **Retirement** | **$** | **$** |
| **7** | **Other Sources of Income** | **$** | **$** |
|  | **TOTAL INCOME**  **(Add Lines 1-7)** | **$** | **$** |

**E. Monthly expenses owed by parents:**

**MOTHER FATHER**

|  |  |  |  |
| --- | --- | --- | --- |
| **1** | **Rent / Mortgage** | **$** | **$** |
| **2** | **Car Payment** | **$** | **$** |
| **3** | **Car Insurance** | **$** | **$** |
| **4** | **Gas Expenses** | **$** | **$** |
| **5** | **Utilities** | **$** | **$** |
| **6** | **Insurance (Health/Home)** | **$** | **$** |
| **7** | **Child Support/Child Care** | **$** | **$** |
| **8** | **Legal Expenses** | **$** | **$** |
| **9** | **Other(Credit cards,loans, etc.)** | **$** | **$** |
| **10** |  | **$** | **$** |
| **11** |  | **$** | **$** |
| **12** |  | **$** | **$** |
| **13** |  | **$** | **$** |
| **14** |  | **$** | **$** |
|  |  |  |  |
|  | **Total Expenses**  **(Add Lines 1-14)** | **$** | **$** |

**F. List Assets of the Parent(s):**

**1. Real Property owned by parent(s), give property description and fair market value:**

|  |  |  |
| --- | --- | --- |
|  | **Description** | **Value** |
| **A** |  | **$** |
| **B** |  | **$** |

**2. Stocks and Bonds owned by the parent(s), give description and fair market value:**

|  |  |  |
| --- | --- | --- |
|  | **Description** | **Value** |
| **A** |  | **$** |
| **B** |  | **$** |

**3. Automobile(s) owned by parent(s), give year, make, model and fair market value:**

|  |  |  |
| --- | --- | --- |
|  | **Description** | **Value** |
| **A** |  | **$** |
| **B** |  | **$** |
| **C** |  | **$** |
| **D** |  | **$** |

**4. Amount in Checking and Savings Accounts:**

|  |  |  |
| --- | --- | --- |
|  | **Description** | **Value** |
| **A** | **Checking Account** | **$** |
| **B** | **Savings Account** | **$** |

**TOTAL ASSETS (Add 1 – 4) $**

**This form was completed on this the** **day of** **, 20**

**by the undersigned Juvenile Probation Officer of Fort Bend County Juvenile Probation**

**department from information reviewed from the above named person(s).**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Juvenile Probation Officer**

**I have read the above and foregoing and the information contained therein is true and**

**correct.**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Father Signature**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Father (Print Name)**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mother Signature**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Mother (Print Name)**

**THE STATE OF TEXAS §**

**COUNTY OF FORT BEND §**

**BEFORE ME,** the undersigned authority, on this day personally

appeared \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_,

known to me to be the person whose name is subscribed in the foregoing

and having been duly sworn, stated on oath that the foregoing is true and

correct.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Notary Public in and for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The State of Texas

**CAUSE NO.**

|  |  |  |
| --- | --- | --- |
| **IN THE MATTER OF** | **§** | **IN THE COUNTY COURT** |
| **A CHILD** | **§** | **AT LAW NO. (** **) OF** |
|  | **§** | **FORT BEND COUNTY, TEXAS** |
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**ORDER OF APPOINTMENT OF COUNSEL**

**On this the \_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_,**

□ it appears to the court that the affiant named herein is indigent

and unable to employ counsel for the representation of the

above named child, or

□ it appears to the court that the affiant named herein **is NOT**

**Indigent** and able to employ counsel for the child.

**IT IS THEREFORE ORDERED** that

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, a duly

licensed attorney, be and is hereby appointed as attorney to represent the

child in this cause.

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**JUDGE PRESIDING**