

IN DETENTION-NOT IN DETENTION

REQUEST FOR APPOINTMENT OF COUNSEL

Respondent: \_\_\_\_\_ Petition No. \_\_\_\_\_  
 Offense (s): \_\_\_\_\_ PO: \_\_\_\_\_  
 \_\_\_\_\_ Offense Category: \_\_\_\_\_  
 Child Lives With: \_\_\_\_\_ (CINS, DCP with no possible TYC, DCP w/possible  
 Relationship: \_\_\_\_\_ TYC, Determinate Sentence, Certification)

\*Father's Name \_\_\_\_\_ \*Mother's Name: \_\_\_\_\_  
 Address \_\_\_\_\_ Address \_\_\_\_\_  
 Place Employed: \_\_\_\_\_ Place Employed: \_\_\_\_\_  
 Annual Income\*\* \_\_\_\_\_ Annual Income\*\* \_\_\_\_\_  
 \*\*Verbal =V Documented =D

Other Relation: \_\_\_\_\_ Other Relation: \_\_\_\_\_  
 Address: \_\_\_\_\_ Address: \_\_\_\_\_  
 Place Employed: \_\_\_\_\_ Place Employed: \_\_\_\_\_  
 Annual Income: \_\_\_\_\_ Annual Income: \_\_\_\_\_

HOUSEHOLD FINANCIAL STATEMENT

<u>Monthly Income</u>	<u>Monthly Expenses</u>
Father/Stepfather _____	Housing _____
Mother/Stepmother _____	Utilities _____
Child Support _____	Food _____
Social Security _____	Medical Expenses _____
SSI _____	Child Support _____
TANF _____	Charge Accounts _____
Food Stamps _____	Car Payment _____
Other _____	Insurance _____ (car, life, health)
TOTAL INCOME _____	TOTAL EXPENSES _____
Legal Dependents: Adults _____ Children _____	
Comments: _____	

I \_\_\_\_\_ the parent (guardian) state that the above information is accurate.  
 Any non-truth (lie) will be considered misrepresentation to the court and I will be prosecuted.

Sworn to and subscribed before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ certify which, witness my hand  
 seal of office

I hereby appoint \_\_\_\_\_, attorney, for the respondent in the above -entitled and  
 numbered cause.

Judge Presiding

Date: \_\_\_\_\_