

IN THE CIRCUIT COURT, SEVENTH JUDICIAL CIRCUIT
IN AND FOR VOLUSIA COUNTY, FLORIDA

IN THE INTEREST OF

CASE NO.:

A CHILD
_____ /

PLEA FORM

I, _____, plead (*choose one*) [**GUILTY/NO CONTEST**] to the charge(s) of:

Count I _____

Count II _____

Count III _____

Count IV _____

Parent/guardian and the child must read and initial each line to show that you understand the following:

_____/____ a. I know that a plea of **GUILTY/NO CONTEST** means that I am saying that I **DID DO/DO NOT CONTEST** the crime(s) listed above. I know that because I am pleading **GUILTY/NO CONTEST** there will be no trial and I am giving up all the things listed in paragraphs a, b, c, d, and e below. I do not want any of the things in the following paragraphs.

_____/____ b. I could make these people, and anyone who might be able to talk or show things about my side of the story, come to court to tell the judge what happened.

_____/____ c. If I wanted to, I could tell the judge what happened. My lawyer or I could present any reason I should not be found guilty of the charge(s). If I did not want to say anything or present a defense, it would not be held against me when the judge decided if the case was proven.

_____/____ d. The State Attorney would have to prove to the judge beyond a reasonable doubt that I did this crime. If the judge did not find that the charge(s) were proven beyond a reasonable doubt, then the judge would find me not guilty and the case would be dismissed.

_____/____ e. If the judge found me guilty, then I could ask a higher court to look at the record and see if the judge made a mistake.

_____/_____/_____. f. I know that my next court hearing will not be a trial, but will be a sentencing, where the judge decides what should happen to me because I did this crime.

_____/_____/_____. g. I know that by pleading **GUILTY/NO CONTEST** I could be under court control until I am nineteen (19) years old or for _____ and that I could be sent to a juvenile facility or have to report to D.J.J. for _____.

_____/_____/_____. h. I know that if I am on community control (probation), or re-entry right now, pleading **GUILTY/NO CONTEST** to this charge may mean I could be brought back to court on the community control charge(s) and get a harsher sentence.

_____/_____/_____. i. My lawyer has explained to me what sentence I could get for each charge, what the State Attorney would have to prove at trial, what reasons I might have to be found guilty, and I understand these things. I have had enough time to talk with my lawyer and am satisfied with his/her services.

_____/_____/_____. j. No one promised me anything to get me to plead **GUILTY/NO CONTEST** to this charge. No one has made a promise about what the judge might give me for a sentence in this case.

_____/_____/_____. k. No one told me I had to plead **GUILTY/NO CONTEST** or forced me or put pressure on me to enter this plea. I am pleading **GUILTY/NO CONTEST** of my own free will.

_____/_____/_____. l. I am not under the influence of any drugs or alcohol today. I am not on any medicine that keeps me from thinking straight or knowing what I am doing.

_____/_____/_____. m. I am not having any mental problems at this time that would keep me from knowing what I am doing by pleading **GUILTY/NO CONTEST**.

_____/_____/_____. n. I know that I have to tell my lawyer and the clerk of court my address and telephone number if I move between now and when I come back to court.

_____/_____/_____. o. I know that my parent(s) and I must make an appointment within the next week (7 days) so a report can be made for the judge about my background and me. I know that **BOTH MY PARENT(S)** and I must show up for this appointment and for any evaluations or tests that are necessary.

_____/_____/_____. p. I have read every word of this form and my lawyer and/or parent(s) have gone over it with me. I fully understand every item I have initialed.

SWORN TO, SIGNED AND FILED this _____ day of _____, 202__.

Child's Signature

Child's Social Security Number

Parent/Guardian's Signature

Parent/Guardian's Social Security Number

I, defendant's counsel of record, certify that: I have discussed this case with the defendant child, including the nature of the charge(s), essential elements of each, the evidence against him/her of which I am aware, the possible defenses he/she has, the maximum penalty for the charge(s) and his/her rights to appeal. No promises have been made to the defendant other than as set forth in writing below. I believe he/she fully understands this written plea, the consequences of entering it, and the defendant does so of his/her own free will.

COUNSEL FOR CHILD

CERTIFICATE OF PROSECUTION

1. I hereby consent to the entry of the plea to the charge(s) listed on page one.
2. The State Attorney's Office makes the following plea agreement with the child:

ASSISTANT STATE ATTORNEY