

ATTORNEY OR PARTY WITHOUT ATTORNEY: STATE BAR NO.: NAME: FIRM NAME: STREET ADDRESS: CITY: STATE: ZIP CODE: TELEPHONE NO.: FAX NO.: E-MAIL ADDRESS: ATTORNEY FOR (name):	<b>FOR COURT USE ONLY</b>
<b>SUPERIOR COURT OF CALIFORNIA, COUNTY OF</b> STREET ADDRESS: MAILING ADDRESS: CITY AND ZIP CODE: BRANCH NAME:	
CASE NAME:	
<b>NOTICE OF HEARING JUVENILE DELINQUENCY PROCEEDING</b> <b>Welfare and Institutions Code, §§ 9 601 9 602 9 725 9 777(a)</b>	CASE NUMBER:

NOTICE TO (name and address):

A hearing has been set for the date and time below. The child and the parent or legal guardian or noticed adult relative are entitled to be represented by an attorney.  
 The court will appoint an attorney for the child if the child cannot afford an attorney.  

**See important notice on page 2.**

1. A hearing will be held

on (date): \_\_\_\_\_ at (time): \_\_\_\_\_ in (dept.): \_\_\_\_\_ (room): \_\_\_\_\_

located at  court address above  other (specify address):

2. The hearing is for the purpose of

- a.  detention hearing.
- b.  formal reading of petition, advisement of rights, and plea.
- c.  jurisdiction hearing.
- d.  disposition hearing.
- e.  review hearing.
- f.  permanency hearing.
- g.  other (specify):

3. TO THE CHILD:

**You have the right to be at the hearing and to present evidence. You have the right to be represented by an attorney. The court will appoint an attorney for you if you cannot afford to pay for one. An attorney can be appointed to speak with you before the court date.**

You are ordered to be present at the hearing.

4. TO THE PARENT, LEGAL GUARDIAN, OR ADULT RELATIVE:

You have the right to be present at the hearing. You have the right to have an attorney present to represent you at the hearing.

Date:

\_\_\_\_\_ ▶ \_\_\_\_\_

(TYPE OR PRINT NAME) (SIGNATURE)

CHILD'S NAME:	CASE NUMBER:
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**- TO PARENT OR LEGAL GUARDIAN -**

1. If the court orders your child to pay *restitution* to the victim of the alleged offense or to pay any *fin*es or *penalty assessments*, you can be required to pay the full amount or, if you cannot afford the full amount, as much of that amount as the court decides you can afford to pay.
2. You will not be required to pay back the cost of services, support, or legal assistance provided to your child by the court or county in this case.
3. You may be required to pay back the cost of services, including counseling, or legal assistance provided to you or family members other than your child by the court or county in this case.



**Requests for Accommodations**

Assistive listening systems, computer-assisted real-time captioning, or sign language interpreter services are available if you ask at least five days before the proceeding. Contact the clerk's office or go to [www.courts.ca.gov/forms](http://www.courts.ca.gov/forms) for *Request for Accommodations by Persons With Disabilities and Response* (form MC-410). (Civ. Code, § 54.8.)