**IN THE COURT OF COMMON PLEAS OF DELAWARE COUNTY, OHIO**

**JUVENILE DIVISION**

**IN THE MATTER OF:**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ : Case No. (s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ :**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ :**

**Alleged \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ :**

 **Children.**

 **The following written information contains the Abuse, Neglect, Dependency Formal Arraignment procedures and your rights in the Delaware County Juvenile Court upon the filing of a Complaint alleging the Abuse, Neglect, or Dependency of children pursuant to Chapter 2151 of the Ohio Revised Code:**

1. You may be represented by an attorney at any time of any proceeding. After being advised of the following rights, you may admit the charge and proceed without an attorney if desired. If you cannot afford an attorney and are considered indigent by the Delaware County Public Defender’s Office, you may request that an attorney be appointed for you as a parent/custodian of the children. A Guardian ad Litem and/or a Court Appointed Special Advocate shall be appointed for the children. If you are a parent and are under the age of eighteen (18), your parents shall also be notified and an attorney shall be appointed for you.
2. You may deny the allegations and have a Trial to the Court if desired.
3. A Probable Cause Hearing is the first hearing before the Court to determine if sufficient cause exists to place the children outside of the home until further hearing. This Probable Cause hearing is often referred to as a Shelter Care Hearing.
4. At the Probable Cause/Shelter Care Hearing, you have the right to ask questions or make statements to the Court as to why Protective Supervision/Temporary Custody of the children should or should not be ordered.
5. The allegations of Abuse, Neglect, or Dependency must be proven by clear and convincing evidence.
6. You have the right to ask questions of any witness who testifies at Trial. You also have the right to testify on your own behalf.
7. You have the right to call witnesses to testify at Trial. You have the right to have those witnesses appear at Trial by filing a written request with the Court stating the names and addresses of the witnesses. If the Sheriff can locate the witnesses prior to Trial, the witnesses shall be served with notice of the hearing and ordered to appear at Trial.
8. You may request a continuance in order to consult an attorney prior to admitting or denying the allegations contained in the Complaint. You may be represented by an attorney at any time during the proceedings.
9. A digital recording shall be made of all proceedings.
10. If the allegations contained within the Complaint are not proven by clear and convincing evidence at Trial, the Complaint shall be dismissed. If the allegations contained within the Complaint are proven by clear and convincing evidence at Trial, the Court may place the children inside or outside the home. If the children are placed outside of the home, a written reunification plan must be prepared to permit safe return of the children to the original home. The Court may order child support payments and/or other support orders for medical care, clothing, or other necessary items if the children are placed outside of the home.
11. The first objective of all Abuse, Neglect, and Dependency hearings is to ensure that the children are safely placed, preferably in the children’s home. Placement will not be made in the home if and until the best interest of the children is served by that placement. The Delaware County Department of Job and Family Services may request permanent custody of the children if reunification with the family cannot be accomplished within a reasonable time and if it is not in the best interest of the children.
12. By signing below, you hereby agree to the following;

[ ]  I can read, write, and speak the English language. I have read and do understand the information outlined above;

* I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**do / do not** waive the right to an attorney for this hearing;

 *(circle choice)*

* I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**do / do not** understand that I can retain an attorney at

 *(circle choice)*

any time throughout these proceedings and I have the right to a court-appointed attorney if I am indigent;

* I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **admit / deny** the allegations contained in the

 *(circle choice)*

Complaint for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 *(Abuse, Neglect, Dependency)*

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Signature of Parent DOB Signature of Parent DOB

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Address City State Address City State

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Soc. Sec. No. (last 4 digits); Phone No. Soc. Sec No. (last 4 digits); Phone No.

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Signature of Custodian (if applicable) Signature of Custodian (if applicable)

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Attorney for Father/ Mother/ Custodian Attorney for Father/ Mother/ Custodian

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Guardian ad Litem

Revised February 14, 2018 DAH