

**Notice to jail personnel and/or any law enforcement agents, and/or any prosecutors:** by placing my name on and/or fully or partially filling out this form, I am hereby invoking my right to counsel as secured by the fifth, sixth and fourteenth amendments to the United States Constitution and Article 1, Section 1, Paragraphs xiv and xvi of the Constitution of the State of Georgia, and am affirmatively Stating that **I do not wish to speak with any agent of the state in any investigatory capacity or answer any questions about these or other vending or potential charges or any matter related in any manner to these or other pending or potential charges.**

In the (Superior) (State) Court of \_\_\_\_\_ County  
State of Georgia

State of Georgia : (Indictment) (Accusation) No:  
v. :  
\_\_\_\_\_ : Charge(s):  
Defendant :

Application For Appointment of Counsel And  
Certificate of Financial Resources

I am the defendant in the above-styled action. I am charged with the offense(s) of \_\_\_\_\_, which is/are a felony/misdemeanor. I cannot afford to hire a lawyer to assist me. I request that I be provided with a lawyer. I understand that I am providing this information in this declaration in order for a determination to be made of my eligibility for an appointed lawyer or public defender, paid by \_\_\_\_\_ County, to defend me on the above charges.

In jail \_\_\_\_\_  
Out on bond \_\_\_\_\_  
Arrest Date \_\_\_\_\_

1. Name \_\_\_\_\_  
Telephone No. \_\_\_\_\_  
Mailing address \_\_\_\_\_  
Birth date \_\_\_\_\_  
Age \_\_\_\_\_  
Social Security Number \_\_\_\_\_  
Highest grade in school completed \_\_\_\_\_
2. If employed, employer is \_\_\_\_\_  
Net take home pay is (gross pay minus state, federal and social security taxes):  
\_\_\_\_\_ (weekly) \_\_\_\_\_ (monthly)
3. If unemployed, how long? \_\_\_\_\_  
List other sources of income such as unemployment compensation, welfare or disability income and the amounts received per week or month: \_\_\_\_\_
4. Are you married? \_\_\_\_\_  
Is spouse employed? \_\_\_\_\_  
If yes, by whom \_\_\_\_\_  
Spouse's net income \_\_\_\_\_ (week) \_\_\_\_\_ (month)
5. Number of children living in home: \_\_\_\_\_  
Ages \_\_\_\_\_

6. Dependents (other than spouse or children) in home, names, relationship, amount contributed to their support \_\_\_\_\_
7. Do you own a motor vehicle? \_\_\_\_\_  
Year and model \_\_\_\_\_  
How much do you owe on it? \_\_\_\_\_
8. Do you own a home? \_\_\_\_\_  
Value \_\_\_\_\_  
How much do you owe on it? \_\_\_\_\_
9. Amount of house payment or rent payment each month \_\_\_\_\_
10. List checking or savings accounts or other deposits with any bank or financial institution and the amount of deposits: \_\_\_\_\_
11. List other assets or property, including real estate, jewelry, notes, bonds or stocks  
\_\_\_\_\_
12. List indebtedness and amount of payments \_\_\_\_\_
13. List any extraordinary living expenses and amount (such as regularly occurring medical expenses) \_\_\_\_\_
14. Child support payable under any court order \_\_\_\_\_
15. Do you understand that whether you are convicted or acquitted the County may seek reimbursement of attorney's fees paid for you if you become financially able to pay or reimburse the county but refuse to do so? \_\_\_\_\_

\_\_\_\_\_ I have read (had read to me) the above questions and answers and they are correct and true.

The undersigned swears that the information given herein is true and correct and understands that a false answer to any item may result in a charge of false swearing.

The \_\_\_\_\_ day of \_\_\_\_\_, 1999.

\_\_\_\_\_  
Defendant's Signature

Sworn to and subscribed before me  
this \_\_\_\_\_ day of \_\_\_\_\_, 1999.

\_\_\_\_\_  
Notary Public

*[NOTE: To prevent the inadvertent or improper release of confidences or secrets, the Order of Appointment below should be produced on a form separate and apart from the "Application for Appointment of Counsel and Certificate of Financial Resources."]*

### Appointment of Counsel

Upon consideration of the Application for appointment of counsel the above-named defendant is found to be indigent/not indigent under criteria of the Georgia Indigent Defense Act and appropriate court rules and is/is not entitled to have appointed counsel.

Attorney \_\_\_\_\_, or the Public Defender's Office is appointed to represent the defendant. The appointed attorney/Public Defender shall promptly make contact with the defendant after actual notice of appointment.

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Administrator of Indigent Defense Program or Designee

cc: Public Defender/Appointed Attorney \_\_\_\_\_, Clerk, District Attorney, Sheriff/Law Enforcement Custodian, Indigent Accused (At detention facility or home address if released)

**This document is in English.**

**ENGLISH**

You have the right to an interpreter if you cannot understand the legal process. If you choose to go forward without an interpreter, you may do so. If you want an interpreter appointed to help you now, please check this box:

Be advised that a delay may be involved in locating an interpreter.

*The court is aware that AT&T's Language Line<sup>®</sup> Service offers over-the-telephone interpretation from English into as many as 140 other languages, 24 hours a day, 7 days a week. No reservations are necessary, and in most cases an interpreter will come on the line in 60 seconds or less. AT&T's Language Line<sup>®</sup> Service account managers can be reached at 800-752-0093, extension 127.*

If you want to go ahead and enter a plea of guilty or nolo contendere without an interpreter (using only this form for translation), please check this box:

## LANGUAGES SERVICED by AT&T LANGUAGE LINE® SERVICES\*

<u>Language</u>	<u>Abbr.</u>	<u>Language</u>	<u>Abbr.</u>	<u>Language</u>	<u>Abbr.</u>	<u>Language</u>	<u>Abbr.</u>
Afrikaans	AFR	Ga	GA	Latvian	LAT	Russian	RUS
Akan	AKA	Gaddang	GAD	Lingala	LIN	Senegalese	SEN
Albanian	ALB	Gaelic	GAE	Lithuanian	LIT	Serbian	SER
Amharic	AMH	Georgian	GEO	Luganda	LUG	Shanghai	SHA
Arabic	ARA	German	GER	Luxembourgseois	LUX	Sicilian	SIC
Armenian	ARM	Greek	GRE	Macedonian	MAC	Sinhalese	SIN
Assyrian	ASS	Gujarati	GUJ	Magahi	MAG	Sindhi	SIND
Azerbaijani	AZE	Haitian Creole	HAI	Maithili	MAI	Slovak	SLO
Bambara	BAM	Hakka	HAK	Malay	MAL	Slovenian	SLV
Basque	BAS	Hausa	HAU	Malagasy	MALA	Somali	SOM
Belorussian	BELO	Hawaiian	HAW	Maltese	MALT	Spanish	SPA
Bengali	BEN	Hebrew	HEB	Mandarin	MAN	Suchown	SUCH
Bhojpuri	BHO	Hindi	HIN	Mandinka	MAND	Swahili	SWA
Bicolano	BIC	Hmong	HMO	Mankon	MANK	Swedish	SWE
Bulgarian	BUL	Hubei	HUB	Marathi	MAR	Szechuan	SZE
Burmese	BUR	Hungarian	HUN	Mien	MIE	Tagalog	TAG
Cantonese	CAN	Hunanese	HUNA	Malayalam	MLM	Taiwanese	TAI
Catalan	CAT	Ibanag	IBA	Nanjing	NAN	Tamil	TAM
Chaochow	CHA	Ibo	IBO	Navajo	NAV	Tigre	TGR
Chamorro	CHAM	Icelandic	ICE	Neapolitan	NEA	Thai	THA
Chavacano	CHAV	Ilocano	ILO	Ninponese	NIN	Tigrinya	TIG
Croatian	CRO	Indonesian	INDO	Norwegian	NOR	Toishonese	TOI
Czech	CZE	Italian	ITA	Oriya	ORI	Tongan	TON
Dakota	DAK	Jakartanese	JAK	Oromo	ORO	Toucoulour	TOU
Danish	DAN	Javanese	JAV	Palestinian	PAL	Tshiluba	TSH
Dart	DAR	Japanese	JPN	Pampangan	PAM	Turkish	TUR
Dutch	DUT	Kanjobal	KAN	Pangasinan	PAN	Turkmen	TURK
Estonian	EST	Kashmiri	KAS	Pao-An	PAO	Ukrainian	UKR
Farsi	FAR	Kazakh	KAZ	Papiamento	PAPI	Urdu	URD

<u>Language</u>	<u>Abbr.</u>	<u>Language</u>	<u>Abbr.</u>	<u>Language</u>	<u>Abbr.</u>	<u>Language</u>	<u>Abbr.</u>
Fijian	FIJ	Khmer (Cambodian)	KHM	Pashto	PAS	Vietnamese	VIE
Finnish	FIN	Kikuyu	KIK	Polish	POL	Visayan	VIS
Flemish	FLE	Kirghiz	KIR	Portuguese	POR	Wolof	WOL
Fon	FON	Korean	KOR	Portuguese Creole	PORC	Wuxinese	WUX
French	FRE	Krio	KRI	Punjabi	PUN	Yiddish	YIO
Fukienese	FUK	Kurdish	KUR	Quechua	QUE	Yoruba	YOR
Fuzhou	FUZ	Laotian	LAO	Romanian	ROM		

\* This list represents languages serviced by AT&T Language Line Services as of mid-summer 1997, and is subject to change without notice based on customer needs.

AT&T Language Line® Services offers over-the-phone interpretation from English into as many as 140 languages. The service is available 24 hours a day, 7 days a week. No reservations are necessary, and in most cases, you are connected with the interpreter that you need in 60 seconds or less. To discuss your specific language interpretation needs, call an AT&T Language Line® Services account manager at 800-752-0093, extension 127.

## **This document is in English.**

### Expected Answers

Yes

No

Maybe

I do not understand

I understand

I agree

That is true

That is not true

Please repeat what you said

I need an attorney

I want to speak to my attorney

I need an interpreter

I am confused

I do not want to do anything without an attorney

I do not want to do anything without my attorney

I do not want to do anything without an interpreter

I want to talk with my family member who is here with me:

father

mother

sister

brother

son

daughter

I want to talk with my friend who is here with me

## **ENGLISH**

### EXPECTED ANSWERS

YES

NO

MAYBE

I DO NOT UNDERSTAND

I UNDERSTAND

I AGREE

THAT IS TRUE

THAT IS NOT TRUE

PLEASE REPEAT WHAT YOU SAID

I NEED AN ATTORNEY

I WANT TO SPEAK TO MY ATTORNEY

I NEED AN INTERPRETER

I AM CONFUSED

I DO NOT WANT TO DO ANYTHING WITHOUT AN ATTORNEY

I DO NOT WANT TO DO ANYTHING WITHOUT MY ATTORNEY

I DO NOT WANT TO DO ANYTHING WITHOUT AN INTERPRETER

I WANT TO TALK WITH MY FAMILY MEMBER WHO IS HERE WITH ME:

FATHER

MOTHER

SISTER

BROTHER

SON

DAUGHTER

I WANT TO TALK WITH MY FRIEND WHO IS HERE WITH ME

**In the \_\_\_\_\_ Court of \_\_\_\_\_ County  
State of Georgia**

Defendant \_\_\_\_\_ Case No. \_\_\_\_\_

**Waiver of the Right to Counsel at Arraignment**

The Defendant in this case, being duly sworn, states as follows (initial each line):

\_\_\_\_\_ I am not under the influence of alcohol or drugs, and I am not suffering from any mental or physical disability.

\_\_\_\_\_ I have been advised of the nature of the charge(s) against me, and the maximum and minimum punishment provided by law. I have been advised that, under the United States and Georgia Constitutions, I have the right to be represented by a lawyer at all critical stages of the criminal process, including my arraignment. I have been advised of my right to a court-appointed lawyer if I cannot afford to hire a lawyer on my own.

\_\_\_\_\_ I have been informed of the benefits of a lawyer, such as a lawyer's ability to explain to me the law and legal proceedings; to investigate my case; to conduct negotiations with the prosecutor, and to cross-examine witnesses, present evidence, and select a jury if I go to trial. I have been warned about the dangers and disadvantages of proceeding without legal representation.

\_\_\_\_\_ Nevertheless, I wish to waive my right to a lawyer and represent myself at my arraignment. I am making this decision voluntarily. No one has made any threat or promise to induce me to waive my right to a lawyer.

I swear under penalties of perjury that these statements are true.

\_\_\_\_\_  
Solicitor

\_\_\_\_\_  
Defendant

\_\_\_\_\_  
Date

After having investigated the facts and circumstances underlying the defendant's wish to waive the right to counsel, including the defendant's background, employment, education, and desires, and after having warned the defendant of the dangers and disadvantages of proceeding without legal representation, I have determined that this defendant has knowingly, voluntarily, and intelligently waived the right to counsel and the right to court-appointed counsel if the defendant is indigent.

This \_\_\_\_\_ day of \_\_\_\_\_, 19\_\_\_\_.

\_\_\_\_\_  
Judge, \_\_\_\_\_ Court of \_\_\_\_\_ County

**In the \_\_\_\_\_ Court of \_\_\_\_\_ County  
State of Georgia**

Defendant \_\_\_\_\_ Case No. \_\_\_\_\_

**Record of Defendant Prior to Entering a Plea**

The Defendant in this case, being duly sworn, states as follows:

I am not under the influence of alcohol or drugs and I am not suffering from any mental or physical disability.

I have been advised of the nature of the charge(s) against me, the maximum and minimum punishment provided by law and my right to be represented by a private attorney, or by a public defender, if I am eligible.

I understand that by entering a plea of guilty or nolo contendere that I waive:

- (1) The right to trial by jury;
- (2) The presumption of innocence;
- (3) The right to confront witnesses against me;
- (4) The right to subpoena witnesses;
- (5) The right to testify and to offer other evidence;
- (6) The right to assistance of counsel during trial; and
- (7) The right not to incriminate myself.

I also understand that by pleading not guilty I will obtain a jury/bench trial. If I choose to remain silent and not enter a plea, a plea of not guilty will be entered on my behalf and I will obtain a jury trial.

I now desire to enter my plea of \_\_\_\_\_ to the charge against me. It is free and voluntary. I have not been told what sentence will be imposed. No promises or threats have been made to me by and District Attorney, Solicitor, Lawyer, Policeman or other person to induce me to enter this plea.

\_\_\_\_\_ I am not represented by a lawyer. I understand the nature of the charges against me and consequences of my plea. I freely and voluntarily waive the benefit of counsel and choose to represent myself in this plea proceeding.

I understand that if I am placed on non-reporting or reporting probation, I cannot violate any criminal laws of any governmental unit or any special conditions of probation without being subject to revocation for the balance of the sentence.

I hereby acknowledge/waive receipt of a copy of the accusation in the above-styled case. I swear under penalties of perjury that these statements are true.

\_\_\_\_\_  
Defendant Date

\_\_\_\_\_  
Prosecutor

\_\_\_\_\_  
Attorney Date

I have satisfied myself that this defendant's plea is free and voluntary and that he/she is in possession of his/her faculties and is able to understand the nature and consequences of his/her plea. I have also determined that this defendant understands he/she has the right to the assistance of counsel at this plea proceeding and knowingly, voluntarily, and intelligently waives the right to counsel if not represented by counsel. The court is further satisfied there has been a sufficient factual basis shown for the acceptance of this plea, and the defendant understands the consequences of his/her plea.

This \_\_\_\_ day of \_\_\_\_\_, 19\_\_.

\_\_\_\_\_  
Judge, \_\_\_\_\_ Court of \_\_\_\_\_ County