The Family Court of the State of Delaware

In and For [ ]  New Castle [ ]  Kent [ ]  Sussex County

**JUVENILE PLEA COLLOQUY**

[ ]  **Delinquent [ ]  Nolo Contendere**

|  |
| --- |
| Case Number |
|       |

|  |  |
| --- | --- |
|  Respondent | Phone # |
|       |       |
| Street Address(including Apt) |
|       |
| P.O. Box Number |
|       |
| City/State/Zip Code |
|        |
| DOB SBI # |
|       |        |

**State of Delaware vs.**

The Respondent must answer the following questions:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| 1.  | Age: |       | . Last grade completed in school? |       |  |
| 2. | Have you ever been a patient in a mental hospital?  |  [ ]  YES [ ]  NO |
| 3. | Are you under the influence of alcohol or drugs at this time?  | [ ]  YES [ ]  NO |
| 4. | Have you freely and voluntarily decided to plead to the charge(s) listed in your written plea agreement? | [ ]  YES [ ]  NO |
| 5. | Have you been promised anything that is not stated in your plea agreement? | [ ]  YES [ ]  NO |
| 6. | Has anyone promised you what your sentence will be? | [ ]  YES [ ]  NO |
| 7. | Has your attorney, the State, or anyone threatened or forced you to enter this plea? | [ ]  YES [ ]  NO |
| 8. | Do you understand that because you are pleading delinquent you will *not* have a trial and you therefore |
|  | waive (give up) the following constitutional rights: |
|  | - | To be presumed innocent until the State can prove each and every part of the charge(s) against |
|  |  | you beyond a reasonable doubt; |
|  | - | To a speedy trial; |
|  | - | To hear and question the witnesses against you; |
|  | - | To present evidence in your defense; |
|  | - | To testify or not testify yourself; and |
|  | - | To appeal to a higher court? | [ ]  YES [ ]  NO |
| 9. |  Do you understand that you could be committed to DSCYF for an indefinite |  |
|  |  commitment? |  [ ]  N/A [ ]  YES [ ]  NO |
| 10. |  Do you understand that your delinquent plea will be a violation of probation? |  [ ]  N/A [ ]  YES [ ]  NO |
| 11. | Do you understand that if this plea is to a drug offense, the adjudication could be considered |  |
|  | as a prior conviction if you face drug charges as an adult? |  [ ]  N/A [ ]  YES [ ]  NO |
| 12. | Is there a mandatory revocation of driver’s license or privileges as a result of your plea?  | [ ]  YES [ ]  NO |
|  | If so, what is the length of revocation?  |       |  |
| 13. | Is this an offense which may result in registration as a sex offender or on the child |  |
|  |  protection registry? | [ ]  YES [ ]  NO |
|  | If so, has your lawyer discussed registration with you? | [ ]  YES [ ]  NO |
|  |  |  |
| 14. |  Are you aware that adjudication of delinquency may result in your deportation, removal, or exclusion |  |
|  | from the United States, or denial of naturalization if you are not a U.S. Citizen?  |  [ ]  N/A [ ]  YES [ ]  NO |
| 15. | Do you understand you may be a person prohibited from purchasing, owning or possessing  |  |
|  |  a deadly weapon and/or ammunition per Title 11 Del. C §1448? | [ ]  YES [ ]  NO |
| 16. | Do you understand you may fall under the jurisdiction of Family Court up to the age of 21  |  |
|  | per Title 10 Del. C §928? | [ ]  YES [ ]  NO |
|  |
| (Parent/Guardian) Do you believe this plea agreement is in the child’s best interest? | [ ]  YES [ ]  NO |
|  |
|  |
|  |
| Signature of Parent/Guardian |  | Signature of Counsel |  | Signature of Respondent |
|  |  |  |  |  |
| Printed Name of Parent/Guardian |  | Printed Name of Counsel |  | Printed Name of Respondent |
|  |  |  |  |  |

Based upon the attached Plea Agreement and this Plea Colloquy executed by the Respondent and after considering the totality of the circumstances, the Court is satisfied the plea is knowingly and voluntarily entered into.

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| --- | --- | --- | --- |
| So Ordered this Date: |       |  |  |
|  | Judge/Commissioner |
|  |  |
| CC: | [ ]  Respondent [ ]  Parents [ ]  Respondent’s Counsel [ ]  Deputy Attorney General [ ]  Staff [ ]  File |