

IN THE COURT OF COMMON PLEAS FOR THE STATE OF DELAWARE  
IN AND FOR  
 NEW CASTLE COUNTY  KENT COUNTY  SUSSEX COUNTY

STATE OF DELAWARE )  
vs. ) Case No(s). \_\_\_\_\_  
 ) \_\_\_\_\_  
 ) \_\_\_\_\_  
Defendant's name (please print) ) D.O.B. \_\_\_\_\_

**GUILTY PLEA IN ABSENTIA**  
(DEFENDANT NOT PRESENT IN COURT)

**PLEAS IN ABSENTIA ARE ONLY ACCEPTED BY PERSONS REPRESENTED BY AN ATTORNEY**

The defendant must answer the following questions in his own handwriting:

1. Charge(s): \_\_\_\_\_
2. Age: \_\_\_\_\_ Last grade completed in school: \_\_\_\_\_
3. Present Employer: \_\_\_\_\_ Salary: \_\_\_\_\_
4. Have you ever been a patient in a mental hospital? \_\_\_\_\_
5. Are you under the influence of alcohol or drugs? \_\_\_\_\_
6. Have you freely and voluntarily decided to plead guilty to the charges listed above? \_\_\_\_\_
7. Have you consulted a lawyer about your decision to plea guilty? \_\_\_\_\_  
If not, do you desire to do so? \_\_\_\_\_
8. If you have consulted a lawyer, are you satisfied that you have had adequate time to confer with him/her and that you have been adequately represented? \_\_\_\_
9. Do you understand that because you are pleading guilty you will not have a trial and you therefore waive (give up) your constitutional right:
  - (a) to a speedy and public trial
  - (b) to a trial by jury
  - (c) to hear and cross-examine witnesses against you
  - (d) to present evidence in your defense
  - (e) to be presumed innocent until the State can prove each and every part of the charges against you beyond a reasonable doubt
  - (f) to appeal you conviction to a higher court? \_\_\_\_\_
10. Do you understand you may plead guilty before a Commissioner of the Court of Common Pleas? \_\_\_\_\_
11. Do you understand that all jail sentences must by law be consecutive (one after the other) and cannot be concurrent? \_\_\_\_\_
12. What is the total consecutive maximum penalty provided by law for the charges to which you are pleading guilty? \_\_\_\_\_
13. Is there a mandatory minimum penalty? \_\_\_\_\_ If so, what is it?  
\_\_\_\_\_
14. If you are on probation or parole, do you understand that your guilty plea will be a violation of probation or parole? \_\_\_\_\_
15. Has anyone promised you or made any guarantee what your sentence will be?  
\_\_\_\_\_

16. Has anyone threatened you or forced you to plead guilty? \_\_\_\_\_  
17. Is your plea the result of a "plea bargain" with the State? \_\_\_\_\_

I hereby certify that I have personally answered each of the above questions, that I fully understand the elements of each offense with which I am charged, and that I understand the consequences of this guilty plea, and hereby consent to the imposition of sentence by the Commissioner of the Court of Common Pleas.

I hereby waive my right to be present in Court for my plea of guilty and for sentencing.

SIGNATURE OF DEFENDANT \_\_\_\_\_ DATE \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF DEFENSE COUNSEL

\_\_\_\_\_  
DEPUTY ATTORNEY GENERAL

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DEFENDANT HAS BEEN ADVISED OF THE FOLLOWING:

PRIOR CRIMINAL HISTORY:

- ( ) Two or more prior felonies
- ( ) Injury while DUI
- ( ) Lack of amenability
- ( ) Repetitive Criminal History
- ( ) None of the above

This record is not certified and represents only my current knowledge regarding the defendant.

As a result of this history, the SENTAC sentence guidelines are as follows:

Lead offense \_\_\_\_\_ up to \_\_\_\_\_ at level \_\_\_\_\_  
charge time

Secondary offense \_\_\_\_\_ up to \_\_\_\_\_ at level \_\_\_\_\_  
\_\_\_\_\_ up to \_\_\_\_\_ at level \_\_\_\_\_  
\_\_\_\_\_ up to \_\_\_\_\_ at level \_\_\_\_\_  
\_\_\_\_\_ up to \_\_\_\_\_ at level \_\_\_\_\_  
\_\_\_\_\_ up to \_\_\_\_\_ at level \_\_\_\_\_  
\_\_\_\_\_ up to \_\_\_\_\_ at level \_\_\_\_\_  
\_\_\_\_\_ or \_\_\_\_\_

Defense Counsel \_\_\_\_\_

Deputy Attorney General \_\_\_\_\_

Date: \_\_\_\_\_