In the Juvenile Court of	County, Tennessee
State of Tennessee in the matter of:	
	Juvenile ID #:
Child Under 18 Years of Age (at the time of offense)	SSN#: DOB//
Statement by	Presiding Judge
As Juvenile Judge for County, Tennessee, I he a Juvenile charged in his Court with either unruly or delinquent be rights:	ereby certify that I have explained to, ehavior, the charges against him/her, and each of the following
 1. The right to be present during the hearing of his/her case 2. The right to be present his/her own testimony 4. The right to have witnesses subpoenaed 5. The right to cross-examine witnesses against him or her 6. The right to have an attorney at each stage of the proceeding 7. The right to appointed counsel 8. The right to remain silent 9. The right to not incriminate him/herself 10. The right and method for appeal and time requirements as 11. Maximum penalties imposed in this Court 12. The right to plead "Not Guilty" 13. If a plea of "Guilty" is entered, the only evidence taken with (sentencing) purposes 14. If a plea is entered acknowledging guilt, the juvenile may sentencing of delinquent or unruly behavior may be used rehabilitation at disposition 16. This case may be used to enhance future offenses if juvening the plea must be some factual basis for a guilty plea he/she of the plea must be voluntary and independently made 17. The right of access to recording of hearing. 	to appeal Ill be for the purpose of verifying the plea and for disposition be asked questions by the Court concerning the conduct ed against the juvenile in determining treatment of the is again brought to Court for later offenses enters
Judge's Signature:	Date:
Statement	by Juvenile
I am the person charged in this case. I understand all the rights, w provided to me by the Youth Services Officer and I understand the	which the Judge explained to me. I have read the Statement of Rights ose rights. I also understand the charges against me.
Parent/ Guardian Signature:	Date:
Juvenile's Signature:	Date:
Waiver of Righ	ats to an Attorney
I choose not to have an attorney assist me in this case, though I kn committed to the Department of Children's Services until I am 19	
Parent/ Guardian Signature:	Date:
Juvenile's Signature:	Date:
Plea o	of Guilty
I plead guilty to the charge(s) against me:	
	I give up my right not to incriminate myself as well as my
right to remain silent. I know the Judge may require the other side plead guilty. I have discussed my plea with my parent/guardian.	to prove every part of their case against me. I give up the rights and
Parent/ Guardian Signature:	Date:
Juvenile's Signature:	Date: