

ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, State Bar Number and Address): TELEPHONE NUMBER: _____ FAX NUMBER (Optional): _____ EMAIL ADDRESS (Optional): _____ ATTORNEY FOR (Name): _____	FOR COURT USE ONLY CASE NUMBER: RELATED CASES:
<p>SUPERIOR COURT OF CALIFORNIA, COUNTY OF SANTA CLARA</p> COURT ADDRESS: 201 North First Street, San José, CA 95113 MAILING ADDRESS: 191 North First Street CITY AND ZIP CODE: San José, CA 95113 BRANCH NAME: Juvenile Dependency	
CHILDREN'S NAMES: _____	
<p>ADVISEMENT AND ACKNOWLEDGEMENT RE: RIGHT TO COUNSEL IN JUVENILE DEPENDENCY PROCEEDING</p>	

1. You have the right to be represented by an attorney in this case (W&I Section 316).
2. You may have a court-appointed attorney if you cannot or do not want to hire an attorney yourself.
3. If you choose to have a court-appointed attorney, you may later have to pay fees for that attorney's services, depending on your financial circumstances and your ability to pay.

IMPORTANT – PLEASE NOTE

4. You also may have to pay fees for the services of the attorney who represents your children, depending on your financial circumstances and your ability to pay.

FINANCIAL DECLARATION

5. Complete the attached Financial Declaration (JV-2020). The Financial Declaration will be used by the Court to determine your ability to pay for the representation of your minor children.
6. If you choose to have a court-appointed attorney, the Financial Declaration will also be used to assess your ability to pay for your own costs.
7. Failure to fill out the Financial Declaration does not prevent the Court from ordering that you pay attorneys fees.
8. I _____, understand this Advisement and have received the Financial Declaration Packet.

Dated: _____

Signature