

**THE STATE OF NEW HAMPSHIRE**  
**JUDICIAL BRANCH**  
<https://www.courts.nh.gov>

Court Name: \_\_\_\_\_

Case Name: \_\_\_\_\_

Case Number: \_\_\_\_\_  
(if known)

**DELINQUENCY ACKNOWLEDGMENT AND WAIVER OF RIGHTS**

I \_\_\_\_\_, my attorney being \_\_\_\_\_, knowingly, intelligently, freely and voluntarily make the following statements which I understand apply to each and every juvenile petition (if there is more than one) to which I admit (which means to "plead true"). I understand I have been charged with the following act(s) of delinquency:

\_\_\_\_\_  
\_\_\_\_\_

I UNDERSTAND that I do not have to admit to the act(s) and that even after signing this Acknowledgment and Waiver of Rights, I still do not have to admit to the act(s).

I UNDERSTAND that by admitting to the act(s), I am giving up the following constitutional rights:  
MY RIGHT to a speedy trial.

MY RIGHT to see, hear and question all witnesses against me. This allows me to face my accusers and question them myself or through my lawyer.

MY RIGHT to present my own evidence and have witnesses testify in my favor.

MY RIGHT to keep silent and not testify against myself, if I choose, and to not have my silence used against me.

MY RIGHT to have the judge order into court all evidence and witnesses in my favor.

MY RIGHT to have my lawyer continue to defend me and to present all defenses I might have.

MY RIGHT not to be found delinquent except by proof beyond a reasonable doubt on all elements of the charge(s), which have been explained to me by my lawyer.

MY RIGHT to have the Court keep out evidence or any confessions which may have been obtained in violation of my constitutional rights.

MY RIGHT to appeal to the Supreme Court, on question of law, if the Petition is found to be true.

I GIVE UP ALL THE ABOVE RIGHTS OF MY OWN FREE WILL.

I UNDERSTAND that I am admitting to the truth of the act(s) in the juvenile petition(s), and that if the Court accepts my admission I may be found to be a delinquent child. I understand my case will be given to a Juvenile Probation and Parole Officer for a background assessment to be reviewed by the Judge before final disposition. This report may contain a recommendation for that disposition.

I AM ADMITTING to the act(s) because the content(s) of the juvenile petition(s) is(are) true. I admit that I did the act(s) charged in the juvenile petition(s). No force has been used upon me. No promises have been made to me by any member of the police department, prosecutor or anyone else in an effort to have me admit to the act(s) except as follows:

\_\_\_\_\_  
\_\_\_\_\_

Case Name: \_\_\_\_\_

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**JUVENILE DELINQUENCY ACKNOWLEDGMENT AND WAIVER OF RIGHTS**

I UNDERSTAND that the Court does not have to follow the recommendation of the police, prosecutor, Juvenile Probation and Parole Officer or anyone else as to the disposition.

I UNDERSTAND that under certain circumstances, if the Court does not follow any recommendation, I may be able to take back my admission and have a trial.

I UNDERSTAND that, within the limits of the law, the Judge may give any disposition s/he feels is fair. My attorney, whose services I am satisfied with, has explained to me the penalties that the Judge may give me as sentence for the delinquent act(s) I have admitted, including paying a fine; paying for the damage I did; putting me on conditional release; requiring community service; returning me to my parents, guardian or custodian; sending me to a group home, crisis home or shelter care home; or sending me to counseling. I understand the Judge has the authority to place me in the New Hampshire Sununu Youth Services Center or, under certain conditions, in the County House of Corrections.

I UNDERSTAND that if I am found to be delinquent for any offense involving the sale, possession, use or abuse of alcohol, or of a controlled drug or drug analog, the Court may and the Director of the Division of Motor Vehicles shall revoke or deny me a driver's license for not less than 90 days or more than one year for first offense and not less than six months or greater than two years for a subsequent offense.

I do not have any questions at this time of my attorney or anyone else. If there are any questions of the Court or if there is anything I would like to say before disposition of this case, my attorney will let the Court know at time of my admission to the act(s) of delinquency. I understand that I may ask to have a copy of this Acknowledgment and Waiver of Rights form.

\_\_\_\_\_ Date

\_\_\_\_\_ Juvenile

\_\_\_\_\_ Parent / Guardian / Custodian

As counsel for the juvenile, I have thoroughly explained to the juvenile all the above, including the nature of the charge, the elements of the act(s) which the State must prove beyond a reasonable doubt, and the maximum and minimum dispositional orders. I believe the juvenile fully understands the meaning of this Acknowledgment and Waiver of Rights, that s/he has the mental capacity to evaluate these rights; I believe that s/he does understand and evaluate these rights and does knowingly, intelligently and voluntarily waive all of his/her rights as set forth herein.

\_\_\_\_\_ Date

\_\_\_\_\_ Attorney for the Juvenile

The undersigned Judge has asked the juvenile if s/he (1) understands the charges against him/her; (2) understands the possible penalties; and (3) understands the fact that s/he is giving up his/her constitutional rights. The undersigned finds that the juvenile has the mental capacity to evaluate the Acknowledgment and Waiver of Rights and finds that s/he does knowingly, intelligently and voluntarily waive those rights.

\_\_\_\_\_ Date

\_\_\_\_\_ Signature of Judge

\_\_\_\_\_ Printed Name of Judge