STATE OF INDIANA)
)SS:
COUNTY OF LAKE)

IN THE HOBART CITY COURT

SITTING IN HOBART, INDIANA

STATE OF INDIANA)
vs.)
)
_____)

CAUSE NO.: 45HO5- _____

WAIVER OF RIGHTS

I, _____, have been advised of each charge that has been brought against me and understand the nature of the charge(s). If I have any questions, I may ask the Court to explain anything I do not understand. I wish to enter a plea of guilty, waive the following constitutional rights and admit the facts alleged in the charge(s). I voluntarily and knowingly waive and give up the following constitutional rights: (Please put initials by each.)

____ A. The right to retain counsel of my own choice;

____ B. The right to have counsel assigned to represent me at no expense to myself if the Court finds that I do not have sufficient funds to hire counsel;

____ C. The right to a speedy and public trial by jury.

____ D. The right to confront in person and cross examine the witnesses who would testify against me;

____ E. The right to have compulsory process for obtaining witnesses to testify in my favor at no cost to me;

____ F. The right to have the State prove my guilt beyond a reasonable doubt at trial at which I cannot be compelled to testify against myself;

____ G. The right to appeal the judgment of the Court if I were to have a trial and be found guilty.

I understand that the Court would allow me to enter a preliminary plea of not guilty and allow me to hire an attorney at my own expense. I verify to the Court the following statements: (Please initial each.)

___ No promise or threats have been made against me in order to make me plead guilty;

___ No promises have been made to me outside the plea negotiation and no one has paid me any money to make me plead guilty;

___ I can read and understand the English language;

___ I am not under the influence of alcohol, prescribed medication or a controlled substance at the time of the signing of this document;

___ My guilty plea to the charge(s) is a voluntary and knowing act on my part;

___ I understand the possibility exists of consecutive sentences if there are multiple charges;

___ I understand that by pleading guilty I admit the truth of the facts in the charges(s);

___ I understand that if my guilty plea is accepted, the Court will proceed to sentencing;

___ I understand that if I am convicted of a traffic offense, the Bureau of Motor Vehicles will be notified of said conviction by this Court.

___ I understand that if I am convicted of a crime it may affect my immigration status if I am not a citizen of the United States.

I verify that I have read this document and that I have indicated true answers.

DATE: _____ DEFENDANT SIGNATURE:_____