



Waiver of Counsel

Mag. Dist. No: MDJ-45-0-00
MDJ Name: Honorable Lackawanna County Central Court
Address: MDJ 45-0-00
Lackawanna County Courthouse
200 North Washington Avenue
Scranton, PA 18503
Telephone: 570-963-6436

v.

Docket No:
Case Filed:
OTN:

I, _____, have been informed that I have the right to have a lawyer represent me, and if I cannot afford one, one will be afforded to me without cost.

I, _____, understand the nature of the charges against me and the elements of each of those charges.

I, _____, am aware of the permissible range of sentences and/or fines for the offenses charged.

I, _____, understand that if I waive the right to counsel I will still be bound by all normal rules of procedure and that counsel will be familiar with these rules.

I, _____, understand that if there are possible defenses to these charges, counsel will be aware of them and if such defenses are not raised at trial, the right to raise the defenses may be lost permanently.

I, _____, understand that, in addition to defenses, I have many rights that, if not timely asserted, may be lost permanently; and that if errors occur and are not timely objected to, or otherwise timely raised by me, correction of these errors may be permanently unavailable to me.

I knowingly, voluntarily, and intelligently waive these rights and choose to act as my own lawyer at this hearing/trial.

(Defendant)

(Date)

I have determined that the Defendant has made a knowing, voluntary and intelligent waiver of his/her right to counsel.

_____ Date _____ Magisterial District Judge

