



WAIVER OF PRELIMINARY HEARING

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, the undersigned, certify that I waive my right to a preliminary hearing. I understand that I have a right to this hearing, at which time I have the right to:

1. be represented by counsel,
2. cross-examine witnesses,
3. inspect physical evidence offered against me,
4. call witnesses on my own behalf, offer evidence on my own behalf, and testify,
5. make written notes of the proceedings or have my own counsel do so, and make a stenographic, mechanical, or electronic record of the proceedings.

I understand that if a prima facie case of guilt is not established against me at this hearing, the charges against me would be dismissed.

I understand that when I am represented by counsel and I waive the right to preliminary hearing, I am thereafter precluded from raising challenges to the sufficiency of the prima facie case.

I understand that if the case is held for court and if I fail to appear without cause at any proceeding for which my presence is required, including trial, my absence may be deemed a waiver of my right to be present, and the proceeding, including the trial may be conducted in my absence.

- I have had a preliminary arraignment during which I was advised of my right to have a preliminary hearing and of my right to counsel.
- I have received a summons wherein I was advised of my right to have a preliminary hearing and of my right to counsel.

I knowingly, voluntarily, and intelligently make this waiver of my preliminary hearing.

Signed this _____ day of _____,

(Defendant)

(Attorney)

Attorney for Defendant (if any)

I HAVE DETERMINED THAT THE DEFENDANT HAS MADE A KNOWING, VOLUNTARY, AND INTELLIGENT WAIVER OF HIS RIGHT TO A PRELIMINARY HEARING.

_____ Date _____ Magisterial District Judge

