

APPEARANCE FORM (CRIMINAL – DEFENDANT SELF REPRESENTED)

IN THE _____ COURT

THE STATE OF INDIANA)
)
vs.) **Case Number:** _____
)
_____)
(Insert Name of Defendant),)
DEFENDANT.)

Appearance by Self Represented Defendant

1. The undersigned Defendant now appears in this case and elects to represent himself/herself without the assistance of legal counsel.

2. Defendant information (as applicable for service):

Name (printed): _____

Address: _____

Telephone: _____

Email Address: _____

3. Additional information specified by state or local rule required to maintain the information management system employed by the court:

CERTIFICATE OF SERVICE

The undersigned certifies that a copy of the foregoing document has been served upon the following parties by the indicated methods: _____

(List Individual Parties & Method of Service)

on _____.

Date: _____

(Defendant's Signature)

(Printed Name)

Authority: Under Criminal Rule 2.1(D), this form shall be filed at the time a defendant elects to represent self without the assistance of legal counsel. In emergencies, the requested information shall be supplied when it becomes available. Parties shall advise the court of a change in information previously provided to the court. This format is approved by the Indiana Office of Court Services.