

APPEARANCE - JUVENILE MATTERS

JD-JM-13 Rev. 1-22
C.G.S. § 46b-120
P.A. 21-15; P.B. §§ 3-2(b), 3-3; 3-4(c),
3-5, 3-6(b), 3-8, 26-3

**This form is available
in other language(s).**

STATE OF CONNECTICUT
**SUPERIOR COURT
JUVENILE MATTERS**
www.jud.ct.gov



Instructions

1. Type or print clearly with ball point pen.
2. File a separate appearance for each child.
3. If this form is e-filed, pursuant to Section 51-193c of the Connecticut General Statutes the document shall have the same validity and status as a paper document that was signed, subscribed, or verified by the filer.

To: The Superior Court for Juvenile Matters

In re: (Name of child/youth)	Docket number
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Address of court (Number, street, town and zip code)

↓ **Please Enter the Appearance of** ↓

Name of official, firm, professional corporation, individual attorney, or self-represented party (See "Notice to self-represented Parties" at bottom)	Juris number of attorney or firm
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Mailing address (Number, street, P.O. Box)	Telephone number
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City/town	State	Zip code	Fax number
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In the above-entitled case as counsel for the:

(Select appropriate box)

- child
- parent (name): _____
- parent (name): _____
- child and parents
- other (name and interest, legal status or relationship): _____

E-mail address

Type of case (Select all that apply)

- Neglect / Uncared-for / Abuse
- Termination
- Probate Transfer
- Emancipation
- Delinquency
- Administrative Appeal
- Appeal from Probate Decision
- Other (specify): _____

Appointment as guardian ad litem for _____

If other counsel or a self-represented party have already appeared for the party or parties indicated above, state whether this appearance is:

- In place of the appearance of attorney or firm _____ already on file or
(Name)
- In addition to appearance already on file.

NOTE: If other court appointed counsel has already appeared for the party or parties indicated above, an appearance in place of the court appointed counsel must be authorized by the Judicial Authority.

Signed (Individual attorney or self-represented party)	Print or type name of person signing at left	Date signed
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Certification

I certify that a copy of the above was mailed or delivered in accordance with Practice Book Sections 3-4(c) and 3-5 of the Connecticut Practice Book.

Name and address of each party and attorney that copy was mailed or delivered to*

Signed (Individual attorney or self-represented party)	Date copy(ies) mailed/delivered
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* If necessary, attach an additional sheet or sheets with the name of each party and the address which the copy was mailed or delivered to

For Court Use Only

Notice to Self-represented Parties

A self-represented party is a person who represents himself or herself. It is your responsibility to inform the Clerk's Office if you have a change of address.

ADA Notice

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at www.jud.ct.gov/ADA.