


<p>WAIVER OF COUNSEL S.J.C. RULE 3:10</p>	COURT DEPARTMENT	<p>Massachusetts Trial Court</p> 
	<p>DIVISION OR COUNTY</p> <p>_____</p>	
<p><i>[In the Matter of:]</i></p> <p>_____</p> <p><i>[v.]</i></p> <p>_____</p>		<p>DOCKET NUMBER(S)</p>

WAIVER OF COUNSEL BY PARTY
[or by Parent or Guardian, if Party is a Juvenile]

The judge has informed me, _____, *[Name of Party, or, if a Juvenile, Name of Parent or Guardian]*, of my right to have a lawyer represent me at every critical stage of the proceedings in this case. The judge explained that if I want a lawyer but cannot afford one, the court will assign the Committee for Public Counsel Services to provide a lawyer for me at no cost or at a reduced cost.

Knowing and understanding the right to have a lawyer represent me, I **still choose to move forward in this case without a lawyer and waive my right to a lawyer.**

Signature of Party, or of Parent or Guardian on behalf of Juvenile _____ Dated: _____

Printed/Typed Name of Person Signing

JUDGE'S CERTIFICATE AND FINDINGS

As required by Supreme Judicial Court Rule 3:10, as amended in 2016, and G.L. c. 211D, § 5, I hereby certify that I have informed the above-named party, or parent or guardian, of the right to counsel in this case. I further certify that, after an oral colloquy with the party, or parent or guardian, I find this party, or parent or guardian, is competent to waive the right to counsel, and has knowingly, intelligently, and voluntarily chosen to proceed without counsel.

The party, or parent or guardian ☐ has executed this waiver of counsel in my presence.
☐ has refused to sign this waiver.

Additional findings (if any): _____

Signature of Justice _____ Dated: _____

Printed/Typed Name of Justice

INTERPRETER CERTIFICATION AND SIGNATURE (If Applicable)

Signature of Interpreter

Printed/Typed Name of Interpreter _____

Language:

☐ Screened ☐ Certified

I certify that I read the translated form in its entirety to the Limited English Proficient signee, or if no translation was available, performed an accurate and complete sight translation to the best of my ability.

Date: _____