

STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY	SUMMONS: ORDER TO APPEAR (DELINQUENCY PROCEEDINGS) / (PERSONAL PROTECTION PROCEEDINGS)	CASE NO. PETITION NO.
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Court address

Court telephone no.

1. In the matter of
name(s), alias(es), DOB

2. TO: [] []
[] []

3. **YOU AND THE JUVENILE ARE ORDERED** to appear in person before the court for a hearing on the allegations in the attached petition(s).

4. The date, time, and place of the hearing are:

5. The purpose of the hearing is
 to decide, **at a trial**, whether the juvenile is guilty or not guilty of the offense(s) in the petition.
 to decide whether the court will waive jurisdiction over the juvenile so that the state may try the juvenile on a felony charge as an adult.
 to decide whether the juvenile should be found in contempt of court for violating a minor personal protection order.
 other:

6. **RIGHT TO ATTORNEY:** The juvenile has the right to be represented by an attorney. If the juvenile wants an attorney, you should hire one immediately so the attorney will be ready on the hearing date. If you or those responsible for the juvenile's support are not financially able to or refuse to provide an attorney, the court should be contacted immediately about a court-appointed attorney.

7. **RIGHT TO TRIAL BY JURY:** If the juvenile wants a jury to decide the facts **at the trial**, you must file a written request with the court within 14 days after the court gives notice of the right to jury trial or 14 days after an appearance by an attorney, whichever is later, but no later than 21 days before trial.

8. **RIGHT TO TRIAL BY JUDGE:** Either a judge or a referee may decide the facts at a trial without a jury. If the juvenile wants a judge to decide the facts **at the trial**, you must file a written request with the court within 14 days after the court gives notice of the right to a judge or 14 days after an appearance by an attorney, whichever is later, but no later than 21 days before trial.

9. **PROBATION VIOLATION HEARING/MINOR PERSONAL PROTECTION ORDER VIOLATION HEARING:** The juvenile may be represented by an attorney, may remain silent, may confront and cross-examine witnesses against him/her, and may present witnesses in his/her favor although **the juvenile is not entitled to a jury at the hearing.**

If you require special accommodations to use the court because of a disability or if you require a foreign language interpreter to help you fully participate in court proceedings, please contact the court immediately to make arrangements.

FAILURE TO APPEAR may subject you to the penalty for contempt of court, and an order may be issued for the juvenile's apprehension and detention.

Date _____

Judge _____

Bar no. _____

SUMMONS

Case No. _____
 Petition No. _____

PROOF OF SERVICE

TO PROCESS SERVER: You are to serve the summons and petition in accordance with MCR 3.920(B)(5) and the instructions of the court. You must make and file your return with the court clerk. If you are unable to complete service you must complete item 3 and return this original and all copies to the court clerk. **Always mark either the box for "Officer Certificate" or "Affidavit of Process Server."**

CERTIFICATE / AFFIDAVIT OF SERVICE / NONSERVICE

<input type="checkbox"/> OFFICER CERTIFICATE I certify that I am a sheriff, deputy sheriff, bailiff, appointed court officer, or attorney for a party (MCR 2.104[A][2]), and that: (notarization not required)	OR	<input type="checkbox"/> AFFIDAVIT OF PROCESS SERVER Being first duly sworn, I state that I am a legally competent adult who is not a party or an officer of a corporate party, and that: (notarization required)
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- 1. I served personally a copy of the summons and petition,
- 2. I served by registered or certified mail (copy of return receipt attached) a copy of the summons and petition,

together with _____
 List all documents served with the summons and petition

_____ on:

Name	Complete address(es) of service	Day, date, time

- 3. I have personally attempted to serve the summons and petition, together with any attachments, on the following individual(s) and have been unable to complete service.

Name	Complete address(es) of service	Day, date, time

Service fee	Miles traveled	Fee	
\$		\$	
Incorrect address fee	Miles traveled	Fee	TOTAL FEE
\$		\$	\$

 Signature

 Title

Subscribed and sworn to before me on _____, _____ County, Michigan.
 Date

My commission expires: _____ Signature: _____
 Date Deputy clerk/Notary public

Notary public, State of Michigan, County of _____

ACKNOWLEDGMENT OF SERVICE

I acknowledge that I have received service of the summons and petition, together with _____
 Attachments

_____ on _____
 Day, date, time

_____ on behalf of _____
 Signature