

**State of Minnesota**

**District Court**

County \_\_\_\_\_

Judicial District: \_\_\_\_\_  
Court File Number: \_\_\_\_\_  
Case Type: Criminal

**State of Minnesota, Plaintiff**

**Probation Violation or Violation  
of Sentencing Order  
Statement of Rights**

vs.

\_\_\_\_\_  
Defendant

1. I understand I am in Court because it is alleged I have intentionally violated the conditions of my probation or stayed sentence as set forth in the violation reports or other papers.
2. I understand I have the following rights:
  - a. an attorney will be appointed to represent me if I cannot afford one;
  - b. a hearing at which the state would be required to prove by clear and convincing evidence that I violated probation or failed to comply with a sentencing order;
  - c. to have complete disclosure in advance of any evidence, including any written reports, to be used against me;
  - d. to call and cross-examine any witnesses called to testify against me;
  - e. to testify myself if I wish;
  - f. to offer evidence, subpoena witnesses and present arguments, describe circumstances or give an explanation;
  - g. to appeal any decision made in my case.
3. I wish to proceed as follows:
  - a. waive (give up) my right to an attorney, admit the violations, and let the Court decide today whether or not to revoke my probation and execute the stayed portion of my sentence. I understand I will be permitted to explain my situation to the judge.
  - b. request a continuance to hire my own attorney.
  - c. request a court-appointed attorney and have completed a form showing my income, property and expenses.
  - d. deny that I violated my probation and request a hearing on another day. I give up my right to an attorney and will represent myself.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature Date of Birth

Your attorney: \_\_\_\_\_

Your Name: \_\_\_\_\_

Street Address: \_\_\_\_\_

Street Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_

E-mail address: \_\_\_\_\_

E-mail address: \_\_\_\_\_