

COUNTY OF \_\_\_\_\_

8<sup>TH</sup> JUDICIAL DISTRICT

Case Number \_\_\_\_\_

**APPLICATION FOR PUBLIC DEFENDER**

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

SS #: \_\_\_\_\_  
Social Security Number

You are not required to provide your social security number, but the application may not be processed without it. The social security number may be used to assist the judge in determining your eligibility to qualify for a public defender and as otherwise provided by law.

Permanent Address: \_\_\_\_\_  
Street Name and Number City State Zip Code

Temporary Address: \_\_\_\_\_  
Street Name and Number City State Zip Code

Emergency Contact: \_\_\_\_\_  
Name Address Telephone

Birth date: \_\_\_\_\_ Home Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_ Messages: \_\_\_\_\_

**READ THIS BEFORE YOU FILL IN THE FORM**

- Even if a Public Defender is named to represent you, you may have to pay back some of the costs.
- If you need help, do not understand a question, or have difficulty reading, ask court personnel to help you.
- If you put false information on your application, it may lead to criminal charges against you.
- Only people who cannot afford to pay for an attorney are eligible to have a Public Defender represent them.
- If any information you give on this form changes (such as address, phone, job, income, etc.), you must notify the Court when the changes take place.
- The judge may conduct a hearing to require you to explain any of your answers.
- If an attorney is appointed, be sure to obtain the name, address and telephone number of your attorney and keep it with you.
- You should know that any information on this form may be checked out and verified by the Court.



6. How often are you paid?

Every week

Every two weeks

Every month

Other \_\_\_\_\_

7. Are you paid by the hour?

Yes

No

a. If yes, how much are you paid per hour? \_\_\_\_\_

b. How many hours a week do you work on average? \_\_\_\_\_

c. Do you receive tips or commissions?  Yes  No

If YES, how much and how often \_\_\_\_\_

8. When you get paid, how much is it, on average? \_\_\_\_\_

9. Estimate how much money you made last year \_\_\_\_\_

10. a. If you are not working, what was your last job? \_\_\_\_\_

b. What is the last day that you worked? \_\_\_\_\_

c. Why are you no longer working there? \_\_\_\_\_

d. When do you intend to work again? \_\_\_\_\_

11. Is your spouse, or the \*person you are living with, employed?  Yes  No

a. If yes, what is their job? \_\_\_\_\_

b. If yes, how often are they paid?

Every Week

Every other week

Every month

Other: \_\_\_\_\_

c. How much is their paycheck, on average? \_\_\_\_\_

12. How many children do you have? (This means your own children) \_\_\_\_\_

13. How many children live with you? \_\_\_\_\_

What are their names and ages: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Do you, your spouse, or the person you are living with, receive money for anything else?

Yes

No

If so, how much?

Nat'l Guard/Reserves \$ \_\_\_\_\_

Child support \$ \_\_\_\_\_

School grants \$ \_\_\_\_\_

Alimony/Maintenance \$ \_\_\_\_\_

Temporary jobs \$ \_\_\_\_\_

Other \$ \_\_\_\_\_

Per capita \$ \_\_\_\_\_

(Gaming Revenue)

\*The "person you are living with" means a person with whom you live and with whom you are involved in a significant romantic or sexual relationship or someone you consider a common law spouse.

15. Do you have any bank accounts?  Yes  No

List the accounts and how much money is in each account?

\_\_\_\_\_

16. How much cash do you have at this time? \_\_\_\_\_.

17. If you own any of the items listed below, place a check mark next to each that you own. List the value of each item that you checked, and how much you owe on it.

Assets	Make/Model or Description	Value	Amount Owed
<input type="checkbox"/> Boats	_____	\$ _____	\$ _____
<input type="checkbox"/> Motorcycles	_____	\$ _____	\$ _____
<input type="checkbox"/> Snowmobiles	_____	\$ _____	\$ _____
<input type="checkbox"/> ATV's	_____	\$ _____	\$ _____
<input type="checkbox"/> Trailers	_____	\$ _____	\$ _____
<input type="checkbox"/> Jewelry	_____	\$ _____	\$ _____
<input type="checkbox"/> Guns	_____	\$ _____	\$ _____
<input type="checkbox"/> Trust/Inheritance	_____	\$ _____	\$ _____
<input type="checkbox"/> Stocks/Bonds	_____	\$ _____	\$ _____
<input type="checkbox"/> House/Mobile Home	_____	\$ _____	\$ _____
<input type="checkbox"/> Land	_____	\$ _____	\$ _____
<input type="checkbox"/> Cars/Trucks	_____	\$ _____	\$ _____
	_____	\$ _____	\$ _____
<input type="checkbox"/> Other assets	_____	\$ _____	\$ _____
<input type="checkbox"/> Other assets	_____	\$ _____	\$ _____
	_____	\$ _____	\$ _____

18. Do you have any other assets that can be sold, pawned, or pledged for cash?

Yes  No

If yes, describe those assets and list their value: \_\_\_\_\_  
\_\_\_\_\_

19. Have you sold, given away, or transferred any assets within the last 90 days or after the date of the charged offense, whichever is earlier?  Yes  No

If yes, describe those assets and list their value: \_\_\_\_\_  
\_\_\_\_\_

20. Do you have any special circumstances that you feel should be considered by the Court in deciding whether or not to appoint a public defender.  Yes  No

If yes, please explain: \_\_\_\_\_  
\_\_\_\_\_

OATH AND AUTHORIZATION FOR INFORMATION

**Failure to sign this oath and authorization may result in delay or rejection of your application for a public defender or court appointed attorney.**

I affirm under oath that the representations contained in this application are true. I understand that lying under oath is perjury and may result in a criminal charge. I hereby authorize any person, corporation, employer, governmental agency or department, bank or financial institution to release information to \_\_\_\_\_ COUNTY DISTRICT COURT for the purpose of verifying the statements contained in this application.

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

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
Maiden name, if married

Signed and sworn to before me

on the \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_.

\_\_\_\_\_  
Deputy/Notary Public

COUNTY OF \_\_\_\_\_

8<sup>TH</sup> JUDICIAL DISTRICT Case Number \_\_\_\_\_

State of Minnesota,

Plaintiff,

**ORDER ON APPLICATION FOR PUBLIC DEFENDER**

vs.

\_\_\_\_\_  
Defendant.

**ORDER FOR APPOINTMENT**

On review of the verified application for a public defender, the defendant is financially eligible for a public defender.

**IT IS ORDERED:**

1. The defendant's application for a public defender is granted.
2. The defendant is required to cooperate fully with the assigned public defender.
3. The defendant is required to immediately report any change in financial status to the court, including any transfers of assets.
4. A \$75.00 co-pay fee shall be paid upon disposition of the case pursuant to Minnesota Statute 611.17.
  - The co-pay fee is waived.
5.  Pursuant to Minnesota Statute 611.20, in addition to the \$75 co-pay, the defendant is required to provide partial reimbursement to the court for public defender costs as follows unless changed by the court at a later date:
 

<input type="checkbox"/> Misdemeanor	\$40	<input type="checkbox"/> Misdemeanor Probation Violation	\$20
<input type="checkbox"/> Gross Misdemeanor	\$80	<input type="checkbox"/> Gross Misdemeanor Probation Violation	\$40
<input type="checkbox"/> Felony	\$120	<input type="checkbox"/> Felony Probation Violation	\$60
<input type="checkbox"/> Other _____		<input type="checkbox"/> Other _____	

**PAYABLE BY:** \_\_\_\_\_

6. Any amounts owed are subject to wage withholding and revenue recapture to assist in the collection where applicable, OR
  - Wage withholding is required in the amount of \$ \_\_\_\_\_ per pay check.
7. Additional provisions:
  - Other \_\_\_\_\_

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

\_\_\_\_\_  
Judge of District Court

**ORDER TO PROVIDE FINANCIAL INFORMATION**

**IT IS ORDERED:**

Within 10 days you must provide to the court the following:

- Wage stubs for the last two months
- Tax returns for the last two years

**IT IS ALSO ORDERED:**

- An inquiry to determine financial eligibility will be held on the next hearing date or on \_\_\_\_\_

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

\_\_\_\_\_  
Judge of District Court

**ORDER DENYING APPOINTMENT OF PUBLIC DEFENDER**

Upon review of the verified application for a public defender,

- The defendant is not financially eligible.
- The application is not complete.
- Other: \_\_\_\_\_

**IT IS ORDERED:**

The defendant's application for a public defender is denied.

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

\_\_\_\_\_  
Judge of District Court