

Person Filing: _____
Mailing Address (if not protected): _____
City, State, Zip Code: _____
Telephone: _____
Email Address: _____
If Attorney, State Bar Number: _____

**SUPERIOR COURT OF ARIZONA
IN MOHAVE COUNTY**

In the Matter of:

Case Number(s): JV _____

(Applicant's Name)

**APPLICATION TO SET ASIDE
JUVENILE ADJUDICATION
(A.R.S. § 8-348)**

(Applicant's Date of Birth)

**[] Request to Modify Monetary
Obligations**

Applicant is: [] Self [] Attorney for Applicant [] Probation or Parole Officer

**(USE BLACK OR BLUE INK: PRINT LEGIBLY)
STATEMENTS TO AND REQUEST(S) OF THE COURT**

I request the court set aside the adjudication(s) on the petition(s) in this/these case number(s) and that the court dismiss the petition(s) and I be released from all penalties and disabilities resulting from the adjudication, **except** unpaid monetary obligations in this case, or penalties imposed by the Department of Transportation pursuant to A.R.S. §§ 28-3304, 28-3306, 28-3307, 28-3308, or 28-3319.

Check all that are true.

- [] I am at least **18** years of age and no longer under the jurisdiction of the juvenile court or the Department of Juvenile Corrections.
- [] I was not adjudicated delinquent for any of the following:
- A dangerous offense as defined in A.R.S. § 13-105;

- An offense for which there has been a finding of sexual motivation pursuant to A.R.S. § 13-118;
- An offense in violation of title 13, chapter 14;
- An offense in violation of A.R.S. §§ 28-1381, 28-1382, or 28-1383 (DUI) if the offense can be alleged as a prior violation pursuant to title 28, chapter 4, or;
- An offense for which I have not paid in full the victim restitution ordered by the court.

☐ I have not been convicted of a felony offense in an adult court.

☐ I do not have a criminal charge pending in an adult court.

☐ I have completed the conditions of my court-ordered probation **or** I have received a discharge from the Department of Juvenile Corrections, and successfully completed my individualized treatment plan under A.R.S. § 41-2820.

☐ All monetary obligations I was ordered to pay have been **paid in full**.

OR

☐ Monetary obligations **have not been paid in full and I request the court modify these obligations**. The following circumstances exist to support my request to modify the monetary obligations owed: (Explain.)

Note: The court can only modify monetary obligations that are not victim restitution.
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Date

Applicant's Signature

Case Number(s): _____

AUTHORIZATION TO PROCEED ON BEHALF OF APPLICANT

I authorize _____ [] attorney, or [] probation or parole officer to
petition the Juvenile Court in _____ County, to take the above-indicated action.

Date

Applicant's Signature

Attorney/Probation or Parole Officer's
Printed Name

Attorney/Probation or Parole Officer's Signature