

IN THE COURT OF COMMON PLEAS OF CAMBRIA COUNTY, PENNSYLVANIA

COMMONWEALTH OF PENNSYLVANIA

v.

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No. _____

DEFENDANT

**GUILTY PLEA EXPLANATION OF DEFENDANT'S RIGHTS – SUMMARY
OFFENSES ONLY**

I intend to plead guilty to the following summary offenses:

Charge(s):	Maximum Sentence and/or Fines: (Minimum Mandatory Sentence if applicable)
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
5. _____	_____

You or your attorney have indicated to the officers of this Court that you wish to plead guilty to certain summary offenses which the Commonwealth of Pennsylvania has brought against you.

You must fully understand that your plea must be voluntary and that no clemency is being promised in exchange for your plea, with the exception of any plea bargain or arrangement previously agreed to between your attorney and the Assistant District Attorney assigned to your case.

By pleading guilty to any charge, you are admitting that you committed that offense.

This form is intended to ensure that you fully understand your rights. If you do not understand a question, please tell your attorney and/or the Judge so that the question can be explained to you. You must fully understand all of your rights before your plea can be accepted by the Judge.

After you have read, understood, and completed your answers to the questions on this form, please initial this page and sign your name on the last page.

Initials: _____

1. What is your full name? _____
2. How old are you today? _____
3. How far did you go in school? _____
4. Can you read, write, and understand the English language? _____
5. Have you consumed any medication, drugs, and/or alcohol that have impaired your ability to understand what you are doing here today? _____
6. Do you understand the nature of the charge(s) to which you are pleading guilty?

7. Do you understand that by pleading guilty, you are admitting that you committed the crime that was charged against you? _____
8. Do you voluntarily admit your guilt to the charge(s) to which you are pleading guilty? _____
9. Has anyone threatened, forced or intimidated you into pleading guilty? _____
10. Have any promises been made to you to enter a plea of guilty other than any plea agreement that has been negotiated for you? _____
11. Have you discussed with your attorney the permissible range of sentences and/or fines that can be imposed against you? _____
12. Are you satisfied with the representation of your attorney? _____
13. Have you had ample opportunity to consult with your attorney before entering your plea of guilty? _____

I affirm that I have read the above document in its entirety, and I understand its full meaning, and I am still nevertheless willing to enter a plea of guilty to the offense(s) specified. I further affirm that my signature and initials are true and correct.

Defendant (Please Print)

Defendant (Please Sign)

As attorney for the defendant, I hereby certify that I have advised my client of his rights and of the meaning of the questions contained in this form, and it is my belief that the defendant understands these rights and that it is his voluntary decision to plead guilty.

Attorney for Defendant (Please Print)

Attorney for Defendant (Please Sign)