
Name

Address

City, State, Zip

Phone

Email

In the Juvenile Court of Utah

_____ Judicial District _____ County

Court Address _____

<p>State of Utah, in the interest of</p> <p>_____</p> <p>Last name, first name</p> <p>_____</p> <p>Date of birth</p> <p>_____</p> <p>A minor <input type="checkbox"/> under <input type="checkbox"/> over 18 years of age, and <input type="checkbox"/> represented <input type="checkbox"/> not represented.</p>	<p>Motion to</p> <p>_____</p> <p>(name of motion) (Utah Rule of Juvenile Procedure 19A - 19C)</p> <p>_____</p> <p>Case Number</p> <p>_____</p> <p>Incident(s)</p> <p>_____</p> <p>Judge</p>
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1. I ask the court to enter an order as follows:
(Write **what** you want the court to order.)

2. I ask for this order because:
(Explain **why** you want the court order. Attach additional sheets if needed.)

4. I request a hearing because:

I do not request a hearing.

5. The assigned intake/probation officer was notified and they agree disagree with this motion.

6. All parties have stipulated to this motion. (Attach proof.)

7. I have attached the following documents in support of this motion:

I declare under criminal penalty under the law of Utah that everything stated in this document is true.

Signed at _____ (city, and state or country).

Date

Signature ► _____

Printed Name _____

Certificate of Service

I certify that I filed with the court and am serving a copy of this Motion on the following people.

Person's Name	Service Method	Service Address	Service Date
(Prosecutor)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Intake/Probation Officer)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Attorney General)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Guardian ad Litem)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Other)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Other)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Other)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		
(Other)	<input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> E-filed <input type="checkbox"/> Email		

Signature ► _____

Date _____

Printed Name _____