

**IN THE CIRCUIT COURT OF THE EIGHTEENTH JUDICIAL CIRCUIT,  
IN AND FOR SEMINOLE COUNTY, FLORIDA**

**JUVENILE DIVISION**

COMPLAINT NO: \_\_\_\_\_

IN THE INTEREST OF:

**NOTICE AND AGREEMENT TO APPEAR  
(DELINQUENCY)**

\_\_\_\_\_  
CHILD(REN)

DOB: \_\_\_\_\_ C.A. \_\_\_\_\_

The undersigned officer/agent certifies that the above-named child has committed an act or violation for which Florida law, authorizes taking the child into custody; however, in lieu of detaining the child in custody, the officer/agent has elected to release the child to a parent/custodian/adult relative with the following agreement:

The undersigned child/parent/custodian/adult relative agrees to appear in court for initial hearing to be conducted at the Juvenile Justice Facility, 190 Eslinger Way, Sanford, Florida on \_\_\_\_\_, 20 \_\_\_\_\_ at \_\_\_\_\_ A.M./P.M.

**FAILURE TO APPEAR IS PUNISHABLE BY CONTEMPT  
AND CHILD WILL BE TAKEN INTO CUSTODY AND PLACED IN DETENTION.**

\_\_\_\_\_  
LAW ENFORCEMENT OFFICER/DJJ AGENT

\_\_\_\_\_  
CHILD'S SIGNATURE

\_\_\_\_\_  
TITLE/POSITION

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
CITY/STATE/ZIP CODE

PARENT'S/CUSTODIAN'S/ADULT RELATIVE'S

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
STREET ADDRESS

\_\_\_\_\_  
AREA CODE/TELEPHONE NUMBER

\_\_\_\_\_  
CITY/STATE/ZIP CODE

**If you are a person with a disability who needs any accommodation in order to participate in this proceeding, you are entitled, at no cost to you, to the provision of certain assistance. Please contact the ADA Coordinator, Court Administration, 301 North Park Avenue, Sanford, FL 32771, telephone number (407) 665-4227 at least 7 days before your scheduled court appearance, or immediately upon receiving this notification if the time before the scheduled appearance is less than 7 days; if you are hearing impaired, call 711.**

DISTRIBUTION: White-Clerk of the Circuit Court (with original sworn Complaint)/Green-State Attorney/Yellow-DJJ/Pink-Parent(Etc)/Goldenrod-Officer or Agent