

# JUVENILE WARDSHIP

(Welf. & Inst. Code, § 601 or 602 et seq.)

## NOTICE OF APPEAL

**Forms:** The attached forms are for use in appeals in the Court of Appeal, Fourth Appellate District, from judgments or orders in juvenile wardship proceedings under Welfare and Institutions Code section 601 or 602 and the following sections. The forms include:

- [Notice of Appeal](#). The notice of appeal should be filled out completely and must be signed by either you or your trial counsel.
- [Motion for Appointment of Counsel on Appeal](#). If you cannot afford to retain an attorney on appeal, the motion for appointment of counsel at the bottom of the notice of appeal should be filled out and signed by you (preferably) or trial counsel. If you have no income and are not in custody, you must explain how living expenses are met.
- [Instructions for Filling Out Notice of Appeal](#).
- [Background Information](#). This information helps to ensure that your appeal is processed correctly and that you are properly represented on appeal. Please file with page 1. It is not confidential.
- [Change of Address](#). Detach and keep the change of address form for use as needed. It is critical you keep the Court of Appeal, Appellate Defenders, Inc., and your appellate attorney informed of your current address at all times.

**When:** A notice of appeal must be filed within **60 days** from the date of the judgment or order being appealed.

**What:** Welfare and Institutions Code section 800 governs appealable orders. These include the judgment (dispositional order) in proceedings under section 601 or 602 and all subsequent orders in those proceedings.

Note: You may not appeal a finding that you committed a violation of law until the court decides what the disposition will be. If the court has not yet ordered a disposition, it is too early to appeal. (Welf. & Inst. Code, § 800.)

**Where:** File the notice of appeal in the juvenile court where the order being appealed was made. If the case was transferred to another county for disposition, the notice of appeal must be filed in the court where the *disposition* was ordered. The main courthouses handling these cases in each county of the Fourth Appellate District are listed below. (If your case was at a branch courthouse, check with your attorney or a court clerk for the filing location.)

SAN DIEGO COUNTY

□ 2851 Meadowlark, San Diego, CA 92123-2792

IMPERIAL COUNTY

□ 939 Main Street, El Centro, CA 92243

RIVERSIDE COUNTY

□ 9991 County Farm Road, Room 108, Riverside, CA 92503

SAN BERNARDINO COUNTY

□ 900 E. Gilbert St., Bldg. 35, San Bernardino, CA 92415-0942

INYO COUNTY

□ 168 North Edwards Street, Independence, CA 93526

ORANGE COUNTY

□ Lamoreaux Justice Center, 341 The City Drive, Suite C-207, Orange, CA 92868-3209

**For assistance:** Contact Appellate Defenders, Inc., a firm of appellate attorneys that manages the entire system of court-appointed counsel in the Fourth Appellate District Court of Appeal: 555 West Beech Street, Suite 300, San Diego, CA, 92101. Telephone: (619) 696-0282. Website with e-mail contacts, forms, ADI California Criminal Appellate Practice Manual, and multiple other resources: <http://www.adi-sandiego.com>



## INSTRUCTIONS FOR FILLING OUT NOTICE OF APPEAL

Please follow these instructions carefully. If you have any questions, ask your trial attorney or Appellate Defenders, Inc., for help.

A notice of appeal must be filed within **60 days** of the dispositional order (or an order after disposition, if that order is being appealed). It is filed with the **county superior court** where the dispositional order (or order after disposition) was made.

The order finding you have committed a violation of law may not be appealed until the court decides what the disposition will be. If the court has not yet ordered a disposition, it is too early to appeal.

The notice of appeal form is designed to be completed easily by checking boxes or filling in the blanks with your case information. Wherever you see a line like this, \_\_\_\_\_, fill the blank in with the appropriate information. The numbers below refer to the numbers on the notice of appeal form:

- (1) **Name and address:** Print your name. Give your address at the time you file the notice of appeal. (Use the change of address form for later changes.) Provide phone number if applicable and date of birth. If you are in custody, provide your inmate I.D. number.
- (2) **County:** Show the county where the dispositional order (or order after disposition) in your case was made.
- (3) **Superior court number:** Show the case number(s) on the notice of appeal form. Ask your attorney if you do not know your superior court number(s). If you were involved in more than one case at the same time, include all of the case numbers you want to appeal.
- (4) **Your name:** Print your name in the blank.
- (5) **Type of order being appealed:** *One of these boxes must be checked.*
  - **Dispositional order:** Check this box if you are appealing a dispositional order made after a finding that you committed a violation of law.
  - **Order after disposition:** Check this box if you are appealing an order made *after* the disposition, and briefly state what that order was.
- (6) **Date:** Enter in this blank the date on which the court made the order you are appealing. If you are not sure, check with your attorney or write, "On or about" and the closest date that you can recall.
- (7) **Signature:** Your signature or your attorney's signature is required. It may *not* be signed by another person, such as your parent.
- (8) **Motion for appointment of counsel:** You are entitled to court-appointed counsel on appeal if you do not have the funds to retain an attorney. Fill out the form at the bottom of the notice of appeal.

### REMEMBER:

- The notice of appeal must be filed with the superior court no later than **60 days** from the date of the dispositional order or order after disposition. If possible, keep some proof of mailing or filing.
- Send the notice of appeal to the **superior court** of the county where your case took place. If the case was transferred to another county for disposition, the notice of appeal must be sent to the court where the *disposition* was ordered.
- Be sure to complete and file **all sections** of the notice of appeal, motion for appointment of counsel, and background information form.
- Detach and keep the [change of address form for use as needed](#). It is critical to keep the Court of Appeal, Appellate Defenders, Inc., and your appellate attorney informed of your current address at all times.

## BACKGROUND INFORMATION

To be filed along with [Notice of Appeal](#) (page 1)

THE INFORMATION ON THIS FORM WILL BE A PART OF THE PUBLIC RECORD AND IS **NOT** CONFIDENTIAL.

Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_ Superior court no. \_\_\_\_\_

Current address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

If applicable: Booking or inmate no.: \_\_\_\_\_ Phone: \_\_\_\_\_ A.K.A : \_\_\_\_\_

**\* IMPORTANT: YOU MUST TELL APPELLATE DEFENDERS, INC., THE COURT OF APPEAL, OR YOUR APPELLATE ATTORNEY WHENEVER YOUR ADDRESS CHANGES. IF YOU FAIL TO DO THIS, YOUR CASE MAY BE DELAYED OR LOST. [CHANGE OF ADDRESS FORMS](#) ARE ATTACHED.**

Family member or friend who will always know your address:

Name and relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Trial attorney:

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

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Proceedings:

- If appeal from dispositional order, describe proceedings, findings sustained, and disposition:  
 If appeal from order after disposition, describe proceedings:

Did you need an interpreter in court?  Yes  No. If yes, in what language? \_\_\_\_\_

Do you have now, or have you ever had, any related appeals, writs, or other proceedings before this or any other California appellate court?  Yes  No. If yes, give case title, number, and dates, and describe proceedings:

Names of other parties and their counsel (whether joint or separate proceedings):

Possible issues on appeal (These are only suggestions. The attorney on appeal will make the final decision on which issues to raise.):

Arrangements for counsel on appeal: Have you *hired* an attorney for your appeal?  Yes  No. If yes:

Name: \_\_\_\_\_ Address and phone: \_\_\_\_\_

**If you cannot afford to hire an attorney, you have the right to have the court appoint one for you. Please fill out and sign the request for counsel on the bottom of the notice of appeal (page 1).**

# NOTIFICATION OF CHANGE OF ADDRESS

- DETACH FROM NOTICE OF APPEAL AND KEEP FOR USE AS NEEDED -

Once a notice of appeal is filed, it is important that the Court of Appeal, your appellate attorney, and Appellate Defenders, Inc., know your current address at all times while the appeal is pending. It is your responsibility to provide your correct address. If you fail to do that, your appeal may be delayed or dismissed.

You do not have to use the forms below, but they may make it easier to provide the information.

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## CHANGE OF ADDRESS

Appeal Number (if known): \_\_\_\_\_ Date: \_\_\_\_\_

Your Name: \_\_\_\_\_ I.D. # (if in custody): \_\_\_\_\_

New Address: \_\_\_\_\_

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City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mail to: Appellate Defenders, Inc.  
555 West Beech Street, Suite 300  
San Diego, CA 92101-2939

*Be sure to notify your attorney, too, if an attorney has been appointed to your case.*

(DETACH HERE)

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## CHANGE OF ADDRESS

Appeal Number (if known): \_\_\_\_\_ Date: \_\_\_\_\_

Your Name: \_\_\_\_\_ I.D. # (if in custody): \_\_\_\_\_

New Address: \_\_\_\_\_

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City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Mail to: Appellate Defenders, Inc.  
555 West Beech Street, Suite 300  
San Diego, CA 92101-2939

*Be sure to notify your attorney, too, if an attorney has been appointed to your case.*