

**APPLICATION FOR
ISSUANCE OF SUBPOENA
JUVENILE MATTERS**

JD-JM-150 Rev. 9-20
C.G.S. § 46b-120;
P.B. §§ 7-19; 32a-2(c)

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STATE OF CONNECTICUT
**SUPERIOR COURT
JUVENILE MATTERS**
www.jud.ct.gov



Court location (Address) _____

Docket number _____ Name of juvenile _____

Case type
 Child Protection Delinquency Emancipation Other _____

Application

I am a self-represented party in this matter and seek to compel the attendance of the individual(s) listed below to testify in this case. I believe that the testimony is necessary and request a judge review this application ex parte and, if the judge determines that the issuance of the subpoena(s) is(are) warranted, direct the clerk of the court to issue the subpoena(s).

I understand that I am responsible for arranging for service of the subpoena(s) and that I am responsible for any expenses incurred unless the court determines that I am financially unable to pay.

Name(s) and address(es) of individual(s) for whom subpoena(s) requested

1.	Name of individual _____	Address (Number, street, and town) _____
Reason why testimony from individual is necessary _____		
Items which individual must bring to court _____		
2.	Name of individual _____	Address (Number, street, and town) _____
Reason why testimony from individual is necessary _____		
Items which individual must bring to court _____		
3.	Name of individual _____	Address (Number, street, and town) _____
Reason why testimony from individual is necessary _____		
Items which individual must bring to court _____		

Proceedings for which subpoena(s) requested (Select appropriate box)

Trial scheduled for (Date) <input type="checkbox"/>	Before Judge (If known) _____	Contested motion/Application hearing scheduled for (Date) <input type="checkbox"/>
Short Calendar matter scheduled for (Date) <input type="checkbox"/>	Before Judge (If known) _____	
Preliminary hearing scheduled for (Date) <input type="checkbox"/>	Other (Specify) _____ <input type="checkbox"/>	
Signed (Self-represented applicant) ▶	Print name _____	Telephone number (Area code first) _____ Date signed _____

Order

After review and consideration of this application under sections 7-19 and 32a-2(c) of the Connecticut Practice Book, the application is:

granted. denied.

The clerk of this court is directed to issue the subpoena(s):

- As requested above.
- As requested above, except: _____
- As to the following individuals only: _____

By the Court	Signed (Judge) _____	Date of Order _____
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Request for Hearing on Denied Application

I request a court hearing on the Application for Issuance of Subpoena denied on _____ Date _____.

Signed (*Applicant*)



Date

Date signed

HEARING TO BE HELD AT THE COURT LOCATION SHOWN ON THE DATE AND TIME SHOWN BELOW:		
Hearing on (<i>Date</i>)	At (<i>Time</i>)	Signed (<i>Assistant Clerk</i>)

Order After Hearing

The application is:

Denied.

Granted as follows:

By the Court (*Print or type name of Judge*)

On (*Date*)

Signed (*Judge, Ass't Clerk*)

Date signed
