

IN THE MATTER OF THE PAROLE OF  OFFENDER #:	WAIVER OF LEGAL COUNSEL WAIVER OF 7 DAY NOTICE WAIVER OF PERSONAL APPEARANCE
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**WAIVER OF LEGAL COUNSEL**

I, the undersigned, do hereby waive my right to be represented by an attorney in connection with the parole revocation proceedings now on file against me.

I have been advised of my legal rights and make this waiver knowingly and voluntarily.

I have been advised that I have a right to an attorney at my own expense and that I may have the right to court appointed counsel depending on the court's review of my application for court appointed counsel if any were filed.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Parolee: \_\_\_\_\_

**WAIVER OF SEVEN (7) DAY NOTICE REQUIREMENT**

I, the undersigned, do hereby waive my right receive 7 days advance notice of my parole revocation hearing. I have been advised of my legal rights and make this waiver knowingly and voluntarily.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Parolee: \_\_\_\_\_

**WAIVER OF RIGHT TO PERSONAL APPEARANCE**

I, the undersigned, do hereby waive my right to a personal appearance before the Administrative Law Judge and do hereby consent to my parole revocation hearing being conducted by telephone. I have been advised of my legal rights and make this waiver knowingly and voluntarily.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

Parolee: \_\_\_\_\_

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I, \_\_\_\_\_ do hereby certify that I personally served this Notice on \_\_\_\_\_ by giving him or her a copy on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ at \_\_\_\_\_ County, Iowa.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

