

Criminal Case Information Statement Form

1. Enter the caption or title of the case as it appears on the papers from the trial court from which you are appealing.
2. Enter the number assigned the case by the trial court from which you are appealing.
3. As you are representing yourself pro se, enter your own name, address, including any email address, and daytime telephone number. If you are not an attorney at law admitted to practice in the State of New Jersey, the only "CLIENT" whom you can represent is yourself.
4. Enter the name, address, including any email address, and telephone number of the county prosecutor's office which represented the State of New Jersey in the trial court and/or where appropriate, the name, address and telephone number of the Office of the Attorney General. See Court Rule 2:5-1 as to adult criminal and juvenile matters. The "CLIENT" is the State of New Jersey.
5. Briefly summarize the terms of the judgment or order which is the subject of this appeal, including its date, and attach a copy.
6. Answer whether there are any issues below involving you which have not been disposed of. If the answer is "No", then you may properly proceed with the filing of a notice of appeal. If the answer is "Yes", then you should immediately move for leave to appeal.
7. Check the appropriate box.
8. Answer whether you are presently confined or on bail. Set forth any SBI number and your date of birth.
9. Answer whether the issue(s) involve only whether the trial court imposed a proper sentence.
10. Answer whether there are any co-defendants and, if so, set forth their names and whether they were tried with you or shared any pretrial motion. (If the co-defendants are juveniles who were not waived up to the Law Division, use only their initials.)
11. Briefly summarize the facts and the procedural history of the case.
12. List the issues which you plan to raise in your appeal.
13. If applicable, answer whether the trial judge issued oral or written findings or an opinion and, if so, set forth on what date.
14. Answer whether you or a co-defendant has an appeal that is pending or about to be brought before this court which involves substantially the same case as your appeal. If you cannot answer "Yes" or "No", you may answer "Unknown".
15. Answer whether you know of any other appeal that is pending or about to be brought before this court which involves an issue similar to or related to an issue in your appeal. If you do not have this information available and cannot answer "Yes" or "No", you may answer "Unknown".

16. Answer whether there was a prior appeal in this court involving this same case or controversy
17. List the case name, type and Appellate Division docket number for any appeal indicated in 14, 15 or 16 above.
18. Enter your name on the line.
19. Enter your name on the line as you are representing yourself pro se.
20. Enter the date on the line.
21. Sign your name on the line.



**New Jersey Judiciary
Superior Court - Appellate Division
CRIMINAL CASE INFORMATION STATEMENT
(For use in Criminal, Quasi-Criminal and Juvenile Actions)**

Please type or clearly print all information.

TITLE IN FULL

TRIAL COURT DOCKET NUMBER

APPELLANT'S ATTORNEY EMAIL ADDRESS:

PLAINTIFF DEFENDANT OTHER (SPECIFY)

NAME

CLIENT

MAILING ADDRESS

CITY

STATE

ZIP

TELEPHONE NUMBER

RESPONDENT'S ATTORNEY EMAIL ADDRESS:

NAME

CLIENT

MAILING ADDRESS

CITY

STATE

ZIP

TELEPHONE NUMBER

GIVE DATE AND SUMMARY OF JUDGMENT OR ORDER BEING APPEALED AND ATTACH A COPY:

Are there any issues below in this action involving defendant which have not been disposed of? YES NO
(If so, leave to appeal must be sought. R. 2:2-4, 2:5-6)

Is the validity of a statute, regulation, executive order, franchise or constitutional provision of this State being questioned? YES NO
(R. 2:5-1(h))

Is defendant presently confined? YES NO

If not, is defendant on bail? YES NO

Provide any State Bureau of Identification (SBI) number and date of birth: _____ / _____

Will the issue(s) in this appeal involve **only** whether the trial court imposed a proper sentence? YES NO

If so, briefs shall not be filed without leave of court. (R. 2:9-11)

Are there co-defendants? YES NO

If so, state their names and whether they were tried with the defendant or shared any pretrial motion.

GIVE A BRIEF STATEMENT OF THE FACTS AND PROCEDURAL HISTORY:

TO THE EXTENT POSSIBLE, LIST THE PROPOSED ISSUES TO BE RAISED ON THE APPEAL AS THEY WILL BE DESCRIBED IN APPROPRIATE POINT HEADINGS PURSUANT TO R. 2:6-2(a)(5). (Appellant or cross-appellant only.):

IF YOU ARE APPEALING FROM A JUDGMENT ENTERED BY A TRIAL JUDGE SITTING WITHOUT A JURY OR FROM AN ORDER OF THE TRIAL COURT, COMPLETE THE FOLLOWING:

1. Did the trial judge issue oral findings or an opinion? If so, on what date? _____ YES NO
2. Did the trial judge issue written findings or an opinion? If so, on what date? _____ YES NO
(Attach a copy.)
3. Will the trial judge be filing a statement or an opinion pursuant to R. 2:5-1(b)? YES NO

Caution: Before you indicate that there was neither findings nor an opinion, you should inquire of the trial judge to determine whether findings or an opinion was placed on the record out of counsel's presence or whether the judge will be filing a statement or opinion pursuant to R. 2:5-1(b).

DATE OF YOUR INQUIRY: _____

1. IS THERE ANY CASE NOW PENDING OR ABOUT TO BE BROUGHT BEFORE THIS COURT WHICH:

- (A) Arises from substantially the same case or controversy as this appeal? YES NO
- (B) Involves an issue that is substantially the same, similar or related to an issue in this appeal? YES NO

2. WAS THERE ANY PRIOR APPEAL INVOLVING THIS CASE OR CONTROVERSY? YES NO

IF THE ANSWER TO EITHER 1 OR 2 ABOVE IS YES, STATE:

Case Name and Type (direct, 1st PCR, other, etc.):

Appellate Division Docket Number:

Name of Appellant or Respondent

Name of Counsel of Record
(or your name if not represented by counsel)

Date

Signature of Counsel of Record
(or your signature if not represented by counsel)