

IN THE JUVENILE COURT OF RICHMOND COUNTY
STATE OF GEORGIA
APPLICATION FOR ACCESS TO / COPIES OF JUVENILE COURT RECORDS
(O.C.G.A. § 15-11-704 et seq.)

In the Interest of: _____
Child's Date of Birth: _____

Case No.: _____

SECTION 1 – APPLICANT INFORMATION

Full Legal Name: _____

Relationship to Child: _____

Mailing Address (including City, State and Zip): _____

Phone: _____ Email: _____

Please provide one of the following forms of identification. A copy must be attached to this application:

☐ Driver's License ☐ State-Issued ID ☐ Other Photo ID ☐ ID No. _____

Bar Number, if person applying is attorney: _____

SECTION 2 – BASIS FOR ACCESS (CHECK ONE; ATTACH SUPPORTING PROOF)

☐ I was the juvenile who was the subject of this record and I am now age 18 or older

☐ I am the parent or legal guardian of the child named above

☐ I am the attorney of record for the child named above

☐ I am the prosecuting attorney or a law enforcement officer – Agency: _____

☐ I am an authorized representative of DJJ / DFCS / another agency – Agency: _____

☐ Other – explain and attach a certified court order granting access, if applicable: _____

SECTION 3 – RECORDS REQUESTED

☐ Entire Case File ☐ Petition ☐ Adjudication Order ☐ Disposition Order

☐ Social History / Predisposition Report ☐ Hearing Transcript ☐ Other: _____

Approximate Date(s) of Proceeding(s): _____ No. of Copies Requested: _____

SECTION 4 – PURPOSE OF REQUEST (REQUIRED – DESCRIBE IN DETAIL WHY THE RECORDS ARE NEEDED)

SECTION 5 – DECLARATION

I declare under penalty of perjury under the laws of the State of Georgia that the foregoing is true and correct and that I am legally entitled to receive the records requested above.

Applicant Signature: _____ Date: _____

Printed Name: _____

NOTICE: Juvenile court records are confidential under O.C.G.A. § 15-11-704 and are open to inspection only upon order of the court, except as otherwise provided by law. Submitting this application does not guarantee release — the court may require a hearing, notice to interested parties, or additional documentation, and may grant, deny, or condition access. A copying/processing fee set by local rule may apply. Records that have been restricted (sealed) under O.C.G.A. § 15-11-723 are not subject to release under this application.

CLERK / COURT USE ONLY

Date Received: _____

Received By: _____

Fee Paid: \$ _____

☐ Approved – Release to _____

☐ Denied due to: _____

Judge Signature: _____

Date: _____

Place Government Issued Identification Card inside of this box and scan. Applications that do not include a government issued ID will automatically be rejected without further review.