NO. _____

THE STATE OF TEXAS	**§**	**THE COUNTY COURT AT LAW**
VS.	**§**	**OF**
_____	**§**	**McLENNAN COUNTY, TEXAS**

WAIVER OF JURY TRIAL AND OTHER RIGHTS, ACKNOWLEDGMENTS AND PLEA

(For Bench Trial ONLY)

I, the Defendant, in person, and in open court, after full consultation with, and with the consent and approval of my attorney, freely and voluntarily enter my plea and make the waivers, requests, acknowledgments and stipulations contained in this document and in the Disclosure of Plea Agreement.

I am the person charged in this Information, I am mentally competent, I understand the charge(s) against me. and my true name is correctly alleged in the Information, unless I have submitted a written name correction. I understand I can plead guilty, not guilty or nolo contendere ("no contest"). I understand the minimum and maximum punishment possible in this case.

Citizenship: Are you a U. S. citizen? ☐ **Yes** ☐ **No** *[Non-citizens MUST complete **Acknowledgment by Non - U.S. Citizen**]*

Defendant's Waivers: I understand I have the following rights: 1) to remain silent, 2) to have these proceedings recorded by a court reporter, and 3) to confront and cross-examine the witnesses against me,. I **DO NOT** waive those rights. I understand I also have the right 1) if I am represented by court-appointed counsel, to ten days to prepare for trial following my attorney's appointment, 2) to a jury trial on any plea I enter, and 3) to a pre-sentence investigation or risk and needs assessment. I **WAIVE** each of those rights. I ask the Court to receive my plea herein and, in the event of a conviction, to assess my punishment without a jury. I consent to and persist in any other stipulations and waivers I have approved in writing and filed with the Court.

Plea: I hereby enter a plea of **Not Guilty** to the charge(s) in the Information.

Ancillary Documents Required

Is family violence alleged? ☐ **Yes** ☐ **No** ☐ **Waived** *[If "yes," **Family Violence Acknowledgment** is REQUIRED.]*

Are you requesting any form of community supervision? ☐ **Yes** ☐ **No** *[If "yes," **Community Supervision Notices** is REQUIRED]*

Are you currently serving in a state or US armed service, **on active duty**? ☐ **Yes** ☐ **No** *[If "yes," **Certificate of Military Service** us REQUIRED]*

I have read this document, it has been explained to me, and I understand the consequences of my plea. I still insist upon my plea above.

Date: _____ **Defendant's signature:** _____

I have consulted with and advised my client concerning the charges and my client's rights, including the plea entered and its consequences. I believe my client is competent and fully understands the admonishments and the consequences of his/her plea. I approve all waivers, acknowledgments, requests and stipulations made herein.

Date: _____ Attorney for Defendant: _____
State Bar Number: _____

APPROVED: Assistant Criminal District Attorney: _____
State Bar Number: _____

The Court finds that the Defendant 1) is mentally competent, 2) understands the nature of the charge(s), 3) has been duly admonished regarding and understands the consequences of the waivers, requests and acknowledgments herein, and 4) persists in Defendant's waivers, requests and plea. The Court, therefore, approves and accepts the written waivers, requests, acknowledgments and plea made herein.

Date: _____ Judge Presiding: _____