	IN THE		COURT									
	_		COUNTY, OHIO)								
Applicant Na	ıme		: : Case No(s)									
			· : Judge:									
			: Application to Expu : Pursuant to R.C. 21	unge Juvenile Record 151.358								
The A pursuant to R.	Applicant moves the .C. 2151.358. In sur	e Court to copport of this a	order the expungement of reapplication, the Applicant prov	ecords pertaining to a juvenile vides the following information:								
1.	Type of Case: □	Delinquenc	ey □ Traffic □ Unruly child									
2.	Date of sealing o	Date of sealing order:										
3.	Nature of the offe	Nature of the offense for which the records were sealed:										
4.	Are you aware c sealed? ☐ Yes [Are you aware of any civil case that has been filed regarding this case that has been sealed? \square Yes \square No										
5.	juvenile and/or ad offense or this ca	dult criminal c ase? □ Yes [or traffic offense since your las	ated or convicted of any other st contact with the Court for this tional pages if necessary):								
	Date		Offense									
	Date		Ollelise	Court or Location								
6.	Please provide your education and employment history below (you may attach additional pages if necessary):											
	Employ	/er	Dates Employed	Reason for Leaving								

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Name of School	Date of Graduation	Area of Study / Degree

						<u>241-17-17-17-17-1</u>								
7.	Please in application	ndicate any on (you may	other info	ormation ddition	on yo	ou w	ould lik if nece	e the ssary	Cou).	rt to k	know	in re	viewing	/our
			20 20											_
The Applicant h	ereby cer	tifies all requ	uirements	s for ex	kpun	ging	the rec	ords a	are r	net.				
Name of Applica	ant						Name (of Atto	rney	/ (if ap	oplica	able)		_
Signature of Ap	plicant (if	pro se)					Signatu	ire of	Atto	rney (if app	olicab	le)	-
Street Address	of Applica	int					Attorne	y Reg	istra	ition N	No. (it	appl	icable)	-
City, State, and	Zip Code	of Applicant	t				Street A	Addres	ss of	f Attor	ney ((if app	olicable)	
Driver's License	No. of A	oplicant (if a	pplicable)		i	City, Sta	te, and	d Zip	Code	of Atte	orney	(if applica	ble)
Telephone of Ap	oplicant (i	f pro se)				i	Email A	ddres	s of	Attori	ney (i	if app	licable)	_
						:	Telepho	one of	Atto	rney	(if ap	plicat	ole)	_
		(1	TO BE CO	MPLETE	ED BY	Y THE	COURT)						
				SER	VICE	Ε								
. А сору	of this	application	was se	erved	by	this	Court	on t	the	Office	e of	the	Prosecu	ıtor

	Α	сору	of	this	application	was	served	by	this	Court	on	the	Office	of	the	Prosecutor
for							, this	- 50	_ day						20_	

Effective Date: October 1, 2020