

IN THE CIRCUIT COURT OF COOK COUNTY, ILLINOIS
DEPARTMENT OF JUVENILE JUSTICE AND CHILD PROTECTION
JUVENILE JUSTICE DIVISION

IN THE INTEREST OF

YOUR NAME

Petitioner

No.

PETITION TO EXPUNGE JUVENILE RECORDS
(705 ILCS 405/5-915 (Subsection 1))
(Please prepare a separate petition for each offense)

Now comes YOUR NAME, Petitioner, and respectfully requests that this Honorable Court enter an order expunging all Juvenile Law Enforcement and Court records of Petitioner and in support thereof states that:
Petitioner has attained the age of 17, his/her birth date being MONTH DAY YEAR, or all Juvenile Court proceedings terminated as of MONTH DAY YEAR, whichever occurred later.
Petitioner was arrested on MONTH DAY YEAR by the NAME OF POLICE DEPARTMENT Police Department for the offense of LIST CHARGE, and
(check one)

- a. no petition was filed with the Clerk of the Circuit Court.
b. was charged with LIST CHARGE and was found not delinquent of the offense.
c. a petition was filed and the petition was dismissed without a finding of delinquency on MONTH DAY, YEAR
d. on MONTH DAY, YEAR placed under supervision pursuant to Section 5-615 of the Juvenile Court Act of 1987 and such order of supervision successfully terminated on MONTH DAY, YEAR
e. was adjudicated for the offense, which would have been a Class B misdemeanor, a Class C misdemeanor, or a petty offense or business offense if committed by an adult. Petitioner has not been arrested on charges in this or any county other than the charges listed above. If Petitioner has been arrested on additional charges, please list the charges below:
Charge(s): ANY ADDITIONAL CHARGES

Arresting Agency or Agencies: NAME(S) OF POLICE DEPARTMENT

Disposition/Result: (choose from a through e, above): SEE ABOVE

WHEREFORE, the Petitioner respectfully requests this Honorable Court to (1) order all law enforcement agencies to expunge all records of Petitioner to this incident, and (2) to order the Clerk of the Court to expunge all records concerning the petitioner regarding this incident.

Petitioner Address: YOUR ADDRESS
City/State/Zip Code:
Telephone: YOUR HOME PHONE NUMBER

SIGN YOUR NAME
Petitioner Signature

Pursuant to the penalties of perjury under the Code of Civil Procedure, 735 ILCS 5/1-109, I hereby certify that the statements in this petition are true and correct, or on information and belief I believe the same to be true.

SIGN YOUR NAME
Petitioner Signature