

**LORAIN COUNTY DOMESTIC RELATIONS COURT**  
**JUVENILE DIVISION**

**LORAIN COUNTY, OHIO**

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Applicant Name

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Case No(s). \_\_\_\_\_

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Judge: \_\_\_\_\_

**Application to Expunge Juvenile Record**  
**Pursuant to R.C. 2151.358**

The Applicant moves the Court to order the expungement of records pertaining to a juvenile pursuant to R.C. 2151.358. In support of this application, the Applicant provides the following information:

1. Type of Case:  Delinquency  Traffic  Unruly child
2. Date of sealing order: \_\_\_\_\_
3. Nature of the offense for which the records were sealed: \_\_\_\_\_
4. Are you aware of any civil case that has been filed regarding this case that has been sealed?  Yes  No
5. To the best of your knowledge, have you been adjudicated or convicted of any other juvenile and/or adult criminal or traffic offense since your last contact with the Court for this offense or this case?  Yes  No

If Yes, please complete the following (you may attach additional pages if necessary):

<u>Date</u>	<u>Offense</u>	<u>Court or Location</u>

6. Please provide your education and employment history below (you may attach additional pages if necessary):

<u>Employer</u>	<u>Dates Employed</u>	<u>Reason for Leaving</u>

<u>Name of School</u>	<u>Date of Graduation</u>	<u>Area of Study / Degree</u>

7. Please indicate any other information you would like the Court to know in reviewing your application (you may attach additional pages if necessary).

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The Applicant hereby certifies all requirements for expunging the records are met.

\_\_\_\_\_  
Name of Applicant

\_\_\_\_\_  
Name of Attorney (if applicable)

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Attorney (if applicable)

\_\_\_\_\_  
Street Address of Applicant

\_\_\_\_\_  
Address of Attorney (if applicable)

\_\_\_\_\_  
City, State, and Zip Code of Applicant

\_\_\_\_\_  
Email Address of Attorney (if applicable)

\_\_\_\_\_  
Birthdate / Social Security# of Applicant

\_\_\_\_\_  
Telephone# of Attorney (if applicable)

\_\_\_\_\_  
Telephone# of Applicant

\_\_\_\_\_

**(TO BE COMPLETED BY THE COURT)**

**SERVICE**

A copy of this application was served by this Court on the Office of the Prosecutor for \_\_\_\_\_, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.