

Instructions to Appellant:

1. Fill out this form by using a typewriter or a computer.
2. If you want to ask the court to excuse you from having to pay the fees, costs and expenses required to appeal, you must file an application with the clerk of the court in which the case was tried or decided. The application is form JD-CR-73. Practice Book section 63-7.
3. Sign the "Appeal" section and the first "Certification" section of this form where marked by an "▶" on the front or 1st page of this form.
4. Give the original of this form to the trial court clerk where the case was originally filed, where the case was transferred (if it was transferred), or any Judicial District court, unless this is a juvenile appeal or an appeal from an interlocutory order in which case you must give it to the clerk of the original trial court or the court where the case was transferred. If you applied to be excused from paying the fees, costs or expenses required for this appeal and the court excused you, you must file a copy of the court's order excusing you from paying the fees, costs or expenses with your appeal if you file your appeal in a different court than the one where your case was tried or decided.
5. The clerk will endorse the form by signing it, stamping it with the date and time that it is given to them, and indicating on the form whether the entry fee was paid, not required to be paid, or it was decided by a judge that it does not have to be paid. The clerk will return the original endorsed appeal form to you.
6. On the same day that the trial court clerk endorses the appeal, you must deliver a copy of the endorsed appeal to the trial court clerk where the case was originally filed and to the clerk of any trial court where the case was transferred. It must be delivered by hand or fax, and you must get proof of each delivery.
7. Within 10 days of filing the appeal, you must:
 - give a copy of the endorsed appeal form and the papers required by Practice Book Section 63-3 and 63-4 to the Appellate Clerk, and
 - sign the 2nd Certification section marked by an "▶" on the front or 1st page of this form indicating that you have sent a copy of the endorsed appeal form and all documents that you must give to the Appellate Clerk to all counsel and self-represented parties of record.
8. If you need more room for any information on this form, please put it on a separate sheet of paper and attach it to this form.

Instructions to Clerk:

- 1) Endorse the form by signing it, stamping it with the date and time of filing and indicating on the form whether the entry fee was paid, not required to be paid, or waived by a judge.
- 2) Return the original endorsed appeal form to the appellant.
- 3) If the appeal is filed in a court other than the court where the case was originally filed, immediately notify the clerk of the court where the case was originally filed that an appeal has been filed. If the appeal is filed in a court that is not the court in which the case was tried or resolved, provide notice to the court in which the case was tried or otherwise resolved.
- 4) Send a copy of the endorsed appeal to the Office of the Chief State's Attorney, Appellate Bureau.

The Judicial Branch of the State of Connecticut complies with the Americans with Disabilities Act (ADA). If you need a reasonable accommodation in accordance with the ADA, contact a court clerk or an ADA contact person listed at www.jud.ct.gov/ADA/

APPEAL - CRIMINAL

JD-SC-29 Rev. 12-09
 P.B. §§ 3-8, 62-7, 62-8, 63-3, 63-4
 C.G.S. §§ 51-197f, 52-470

See Instructions on Back/page 2

To Supreme Court To Appellate Court

Name of case _____

Classification
 Appeal Cross appeal Joint appeal Amended appeal Stipulation for reservation Corrected/amended appeal form Other (Specify) _____

Trial Court History	Tried to <input type="checkbox"/> Court <input type="checkbox"/> Jury <input type="checkbox"/> Magistrate		Trial court location _____	
	Trial court judges being appealed _____		List all trial court docket numbers, including all location prefixes _____	
	All other trial court judge(s) who were involved with the case _____			
	Judgment for <input type="checkbox"/> State of Connecticut <input type="checkbox"/> Defendant			
	Judgment date of decision being appealed _____		Date of issuance of notice on any order on any motion which would render judgment ineffective _____	Date for filing appeal extended to _____
	Case type <input type="checkbox"/> Infraction <input type="checkbox"/> Juvenile <input type="checkbox"/> Felony/Misdemeanor <input type="checkbox"/> Other (Specify) _____			

Appeal	Appeal filed by <input type="checkbox"/> State of Connecticut <input type="checkbox"/> Defendant _____ <input type="checkbox"/> Other _____		
	From (the action which constitutes the final judgment): _____		
	If this appeal is taken by the State of Connecticut, give name of Judge granting permission to appeal and date of order _____		
	If to the Supreme Court, the statutory basis for the appeal (<i>Connecticut General Statutes section 51-199</i>) _____		
	By (Signature of attorney or self-represented party) ▶ _____	Telephone number _____	Fax number _____ Juris number (If applicable) _____

Appearance	Type name and address of person signing above (<i>This is your appearance; see Practice Book section 62-8</i>) _____		E-mail address _____
	"X" one if applicable <input type="checkbox"/> Counsel or self-represented party who files this appeal will be deemed to have appeared in addition to counsel of record who appeared in the trial court under Practice Book section 62-8. <input type="checkbox"/> Under Practice Book section § 3-8, counsel or self-represented party who files this appeal is appearing in place of: _____		
	Name of counsel or self-represented party _____		Juris number (If applicable) _____

Certification (Practice Book section 63-3)	I certify that a copy of this appeal was mailed or delivered to all counsel and self-represented parties of record as required by Practice Book section 62-7 on: * ▶ _____		Signed (<i>Individual counsel/self-represented party</i>) ▶ _____
	* Attach a list with the name, telephone number and fax number of each counsel and self-represented party and the address where the copy was mailed or delivered.		

To Be Completed By Trial Court Clerk		For Appellate Clerk's Office Use Only
<input type="checkbox"/> Entry Fee Paid <input type="checkbox"/> No Fees Required <input type="checkbox"/> Fees, Costs, and Security waived by Judge (<i>enter judge's name below</i>) _____		
Judge _____	Date waived _____	
Signed (<i>Clerk of trial court</i>) _____	Date _____	
The clerk of the original trial court, if different from this court, was notified on _____ that this appeal was filed.		
A copy of this endorsed appeal was provided to the Office of the Chief State's Attorney, Appellate Bureau, on _____.		

Documents to be given to the Appellate Clerk with the endorsed Appeal form	The following documents must be filed with the Appellate Clerk when filing the endorsed appeal form; Practice Book section 63-4. 1. Preliminary Statement of the Issues 2. Preliminary Designation of Pleadings 3. Court Reporter's Acknowledgment/Certification re transcript 4. Docketing Statement 5. Constitutionality Notice (if applicable) 6. Sealing Order form, if any
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Certification	I certify that a copy of the endorsed appeal and all documents to be given to the Appellate Clerk with the endorsed Appeal form were mailed or delivered to all counsel and self-represented parties of record* as required by Practice Book section 63-3 on: _____		Signed (<i>Individual counsel or self-represented party</i>) ▶ _____
	* Attach a list with the name, telephone number and fax number of each counsel and self-represented party and the address at which the copy was mailed or delivered.		