



Lake County  
Court of Common Pleas  
*Juvenile Division*

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Judge Karen Lawson

**This form may require a filing fee, please refer to the Fee Schedule.**

**COURT OF COMMON PLEAS  
- JUVENILE DIVISION -  
LAKE COUNTY, OHIO**

**APPLICATION TO SEAL RECORD**

Name:		Address:	
City:		Phone:	
Zip:		D.O.B:	
SSN:		Offense:	
Case No.			

I, \_\_\_\_\_ do hereby certify that it has been two years or more since I was under the jurisdiction of the Juvenile Court.

Therefore, I request my juvenile record to be sealed pursuant to Ohio Revised Code Section 2151.358.

\_\_\_\_\_  
Applicant

\_\_\_\_\_  
Date

☐ Request by mail (see attached)

☐ Request by phone \_\_\_\_\_  
Date

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**PROSECUTOR'S REVIEW**

☐ APPROVE

☐ OBJECT

\_\_\_\_\_  
Prosecutor

\_\_\_\_\_  
Date

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**PROBATION OFFICER'S REVIEW**

☐ NOT APPLICABLE

☐ APPROVE

☐ OBJECT

\_\_\_\_\_  
Probation Officer

\_\_\_\_\_  
Date