

# APPLICATION FOR PRE-TRIAL **DIVERSION** PROGRAM

(Please type or print clearly - ALL answers must be complete.)

Defense Attorney: \_\_\_\_\_

Court Date: \_\_\_\_\_  
Case #: \_\_\_\_\_  
Charge(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## PERSONAL INFORMATION

Full Name: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Time at present address: \_\_\_\_\_ Living with \_\_\_\_\_ Relationship: \_\_\_\_\_

Age: \_\_\_\_\_ Birthdate: \_\_\_\_\_ Birthplace: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_

Social Security #: \_\_\_\_\_ Driver License #: \_\_\_\_\_ State: \_\_\_\_\_

Telephone Number – HOME ( ) \_\_\_\_\_ CELL ( ) \_\_\_\_\_

Email Address: \_\_\_\_\_

Marital Status: \_\_\_\_\_ Spouse's Name: \_\_\_\_\_ Employed:  Yes  No

Number of dependents: \_\_\_\_\_ Names and ages: \_\_\_\_\_

Nearest contact not living with you (name/address/phone): \_\_\_\_\_  
\_\_\_\_\_

**\*\*Do you currently OR at the time of this offense own/possess a commercial driver's license?\***  
 Yes  No

Present Employer/ Address/Phone \_\_\_\_\_  
\_\_\_\_\_

Occupation: \_\_\_\_\_ Date employed: \_\_\_\_\_ Salary/Wages \$ \_\_\_\_\_

Other Income \$ \_\_\_\_\_ Source: \_\_\_\_\_

## CRIMINAL HISTORY

(Attach additional pages if necessary)

List **ALL (your entire life time)** prior or pending offenses, including criminal, traffic and **juvenile**. Include ALL arrests and convictions, **even if subsequently expunged or dismissed**. Also, list **any other diversion programs** in which you have previously participated. **\*This includes in other cities and states.**

Date Approximate Date/Year	Offense – Juvenile and/or Adult	Location	Disposition/Final Outcome
		City/State	<input type="checkbox"/> Convicted <input type="checkbox"/> Diverted <input type="checkbox"/> Dismissed <input type="checkbox"/> Expunged <input type="checkbox"/> Pending
			<input type="checkbox"/> Convicted <input type="checkbox"/> Diverted <input type="checkbox"/> Dismissed <input type="checkbox"/> Expunged <input type="checkbox"/> Pending
			<input type="checkbox"/> Convicted <input type="checkbox"/> Diverted <input type="checkbox"/> Dismissed <input type="checkbox"/> Expunged <input type="checkbox"/> Pending
			<input type="checkbox"/> Convicted <input type="checkbox"/> Diverted <input type="checkbox"/> Dismissed <input type="checkbox"/> Expunged <input type="checkbox"/> Pending
			<input type="checkbox"/> Convicted <input type="checkbox"/> Diverted <input type="checkbox"/> Dismissed <input type="checkbox"/> Expunged <input type="checkbox"/> Pending

**\*Failing to give a full criminal history may result in disqualification for the diversion program.**

State in your own words why the charges against you have been filed: \_\_\_\_\_

\_\_\_\_\_

State in your own words any circumstances that caused you to choose to violate the crime(s) with which you are charged:

\_\_\_\_\_

\_\_\_\_\_

Explain why you feel you could successfully complete the diversion program and the benefits it would have for you and the community: \_\_\_\_\_

\_\_\_\_\_

I have read the foregoing application. All of the information is true and correct. I understand that if any of the foregoing information is not true and correct, this may be a basis for denial of the diversion or a revocation of my diversion. I request a continuance of the court date for my case to allow the city time to review my application and obtain the information necessary to determine whether or not a diversion can be granted. I understand that I have a right to a speedy trial and I knowingly and voluntarily waive the right to speedy trial.

\_\_\_\_\_  
Defendant's Signature

\_\_\_\_\_  
Date