



APPLICATION TO THE RESTORATIVE JUSTICE, PRETRIAL
DIVERSION PROGRAM, 5TH JUDICIAL CIRCUIT DISTRICT
ATTORNEY

Full Name: _____

Date of Birth: ____/____/____

SSN: _____

Case Numbers: _____

Date of Application: _____

Program Contacts: (256) 234-2735

INSTRUCTIONS

Thank you for considering the 5th Judicial Circuit's Restorative Justice - Pretrial Diversion Program. Please carefully read the following questions, and consider your responses carefully. Please be sure to be as complete and as accurate as possible in your responses.

You will be expected to perform a diligent effort to obtain the information that is contained in the application. The information that you provide on this application will be used to determine your suitability for the Pretrial Diversion Program.

Your application may be delayed or denied based on incomplete or missing information. Please make sure to complete the application to the best of your ability. If a particular section does not apply to you, please mark the blank N/A.

If your response requires more space than is allowed on the application, please use the supplemental page at the back of this form. Make sure to include which question that you are supplementing the answer for.

A background check will be conducted to verify the information on this application. False, incomplete, or misleading statements on the application will result in the denial of your application.

If you have any questions or need additional information to complete this form, please contact the Restorative Justice - Pretrial Diversion Office at (256) 234-2735.

Do you currently pay child support? If so, list courts, payees, and amount each below.

1. _____
2. _____
3. _____

Have you ever been charged with a crime before? If so, please list the charges, outcomes, jurisdiction, and dates below. Please include all charges regardless of outcome, dismissal, or juvenile/youthful offender status. This includes charges obtained out of the State of Alabama or in the military justice system, whether disposed of by courts-martial or Art. 15 of the UCMJ.

1. _____
2. _____
3. _____
4. _____

Are you a United States military veteran? Yes No Sex: M F

Please list below all of your previous addresses that you have resided at in the last 10 years. If you need additional space, please use the additional pages at the end of this application. Please list in the following format: 123 Anywhere St., Apt. 1, Alexander City, AL 35010

- 1: _____
- 2: _____

Phone #: _____ Alternate #: _____

Reference's/next of kin: Names, relationship, and phone number:

1. _____
2. _____
3. _____

Driver's License Number and State: _____

Is Your Driver's License Currently Valid? _____

Are you represented by an attorney? _____

What is the name of your attorney? _____

Do you have a Commercial Driver's License? _____

Please list an email address that you use regularly. _____

Are you a U.S. Citizen: Yes No If no, are you in the U.S. legally?
Yes No

Do you have a high school diploma or GED? _____

Are you currently employed? _____

Who is your employer? _____

How long have you worked for your current employer? _____

Initial Each:

_____ I want to participate in the District Attorney's Pretrial Diversion Program. I understand that in order to participate in the Pretrial Diversion Program, I must plead guilty to the offense(s) for which I am charged. I understand and agree that if I am terminated from the program that I cannot withdraw my guilty plea for that reason.

_____ I understand that I will be evaluated by staff of the Pretrial Diversion Program to determine if I am eligible.

_____ I hereby authorize the District Attorney's Office to obtain any/all employment, school, medical, military, criminal, civil, and other records deemed necessary for the evaluation, and I hereby authorize all persons in possession of the information to release it to the District Attorney's Pretrial Diversion Program.

_____ I understand that if my application is determined eligible for consideration, a representative from the District Attorney's Pretrial Diversion Program will contact me and schedule an intake interview. I also understand that if I fail to complete the interview as scheduled, my application can be denied.

_____ I understand and agree that all communication between myself and the District Attorney's Pretrial Diversion Program will be in electronic form, delivered to the email address listed above. I understand that it is my responsibility to update the District Attorney's Pretrial Diversion Program of any changes in email addresses.

_____ I understand that important information about mandatory report dates, court dates, testing obligations, or other information critical for my completion of the District Attorney's Pretrial Diversion Program will be sent to the email address above. I understand that the records of "sent" emails in the District Attorney's Pretrial Diversion Program's records will be used for "proof of service".

_____ I understand that if I am accepted into the Pretrial Diversion Program, I will sign an Agreement and will follow its terms or I can be terminated from the Pretrial Diversion Program. I agree not to violate any laws of the State of Alabama, any other state, or any Federal laws during the application period or during the course of the Program.

_____ I understand that if I am allowed to participate in the Pretrial Diversion Program and it is determined later that I have been untruthful in this application, I can be terminated from the Pretrial Diversion Program.

_____ I agree to meet with the Pretrial Diversion Coordinator to complete the Agreement with/without counsel. I understand that all admissions, records, or other communications involving the Pretrial Diversion Program shall not be admissible in any subsequent criminal proceeding.

_____ I understand that incurring a new criminal offense in any jurisdiction from this point forward will be grounds for termination or denial from the program.

_____ I have thoroughly read and understand the above terms and conditions required for admittance into the Pretrial Diversion Program.

_____ I understand that I have a constitutional right to be represented by an attorney regarding any criminal charges against me. By signing this agreement I acknowledge that I have either consulted with an attorney about the charges that I am applying for Pre-Trial Diversion and I am entering this agreement on advice of counsel or hereby expressly waive my right to be represented by an attorney and enter into this agreement voluntarily by my own admission and free will. I understand that a criminal conviction may affect my immigration status, and that if I am a non-citizen, entering a plea of guilty may subject me to removal from the United States.

_____ I have been advised that the application fee for the District Attorney's Pretrial Diversion Program is \$107.00. I understand that this fee is to cover application costs of the program, and does not guarantee my entry into the program. This fee will not be refunded to me if I am not accepted into the program.

Signature of Applicant

Date

AUTHORIZATION TO RELEASE INFORMATION TO PRETRIAL DIVERSION OFFICE

I, _____ the undersigned, hereby authorize the Restorative Justice - Pretrial Diversion Program of the District Attorney of the 5th Judicial Circuit of Alabama or its authorized representative(s) or employee(s) bearing this release or copy thereof, to obtain any information in your files pertaining to my employment, education records, medical records, psychological and psychiatric records, residential records, Department of Veteran's Affairs records, military service and military disciplinary records, juvenile or youthful offender records in any state of the United States, any other type of records that may exist which may contain personally identifiable information or information derived from those records, or any other records pertaining to me that the Pretrial Diversion Director may deem pertinent.

I hereby direct you to release such information. This release is executed with full knowledge and understanding that the information is for the Restorative Justice - Pretrial Diversion Program of the District Attorney of the 5th Judicial Circuit of Alabama's official use. I hereby release you, as custodian of such records, any school, college, or university, or other educational institution; hospital or other repository of medical records; social service agency; any employer or retail business establishment, including its officers, employees, or related personnel, both individually and collectively, from any and all liability for damages of whatever kind which may at any time result to me, my heirs, family, or associates because of compliance with this authorization and request for information or any other attempt to comply with it.

The information hereby obtained by the aforementioned Restorative Justice Office is to be used only for the purpose of pretrial services investigation and report and, if applicable, for supervision. If I am found guilty, such information will also be made available to the court for sentencing purposes. Regarding protected health information, I understand that this authorization is valid until my release from supervision, at which time this authorization to use or disclose this information expires. I understand that information used or disclosed pursuant to this authorization may be disclosed by the recipient and may no longer be protected by federal or state law.

Regarding protected health information, I understand that I have the right to revoke this authorization, in writing, at any time by sending such written notification to the Pretrial Diversion Office contact at:

Restorative Justice - Pretrial Diversion Office, 395 Lee Street, Alexander City, Alabama 35010

I understand that if I revoke this authorization to release confidential information, I will thereby revoke my authorization to further disclosure of such information. I also understand that revoking this authorization before I satisfy the condition of my supervision that requires me to participate in the program will be reported to the court. My revocation of authorization under such circumstances could be considered a violation of a condition of my pretrial diversion agreement.

All records to be provided through this Release shall identify the Custodian of Records of the entity disclosing the records, and the records shall be accompanied with a Affidavit for Business Records. A copy of an Affidavit for Business Records will be made available for your use by the Restorative Justice - Pretrial Diversion Office upon request.

(Authorizing Signature)

(Full name – Printed or Typed)

(Date)

ADDITIONAL/SUPPLEMENTAL INFORMATION

Please use this page to supplement or to add onto responses in the applicaiton.

[illegible]