



THE OFFICE OF THE DISTRICT ATTORNEY

THIRTY SEVENTH JUDICIAL CIRCUIT

LEE COUNTY, ALABAMA

www.leecountyda.org

The Pretrial Diversion program (PTD) is a program for non-violent, first-time offenders. To be eligible for the program, you cannot have a prior or pending felony on your record, you cannot have a prior charge for the same charge you are applying to the program with, and you cannot have completed the same or similar program in the past, in any county, in any state. All DUIs will be looked at on a case-by-case basis. If you have prior cases in which you have a remaining balance, this balance must be paid in full prior to PTD acceptance.

If you apply with a DUI – you will likely be required to have an Ignition Interlock device installed in your vehicle, complete drug/alcohol classes with the Court Referral Office, complete community service hours, have a balance which includes your court costs and fines to be paid in full, and anything else the District Attorney's Office includes in your program within 12 months.

If you apply with a drug related case – you will likely complete drug/alcohol classes with the Court Referral Office, complete community service hours, have a balance which includes your court costs and fines to be paid in full, and anything else the District Attorney's Office includes in your program within 12 months (misdemeanors) & 18 months (felonies).

All other cases – will likely complete community service hours, have a balance which includes your court costs and fines to be paid in full, and anything else the District Attorney's Office includes in your program within 12 months (misdemeanors) & 18 months (felonies).

Hand file the attached application for the Pretrial Diversion Program in the Lee County Circuit Clerk's Office, along with the \$100 application fee (cash, cashier's check, or money order – made payable to the Lee County Circuit Clerk). The Circuit Clerk's Office is located at the address listed below. Once the application has been processed, I will notify the defendant of the approval or denial of the application. If the defendant is currently in jail, I will notify the attorney on record. This can take up to 90 days.

Thank you,

Cecilia Smoak

Pretrial Diversion Coordinator
Lee County District Attorney's Office
2311 Gateway Drive
Opelika, Alabama 36801
(334)737-3443

IN THE _____ COURT OF LEE COUNTY, ALABAMA
 STATE OF ALABAMA)
)
 V.) Case Number(s): _____
 _____,) _____
 DEFENDANT)

APPLICATION FOR PRETRIAL DIVERSION
FOR THE 37TH JUDICIAL CIRCUIT OF ALABAMA

PLEASE PRINT LEGIBLY AND USE BLACK INK ONLY!!

****Required fields***

*Full Name: _____ Maiden Name, Nickname, Other Names Used: _____

*Date of Birth: ____/____/____ *SSN: _____ *Sex: M () F () *Race: _____

Home Address: _____ Employer: _____

City, Zip _____ Work Address: _____

Married: YES or NO # of Dependents: _____ City, Zip _____

Home Phone: _____ Work Phone: _____

*Cell Phone: _____ *Email Address: _____

*Driver's License Number and State: _____ Is Your Driver's License Currently Valid? YES ___ NO ___

Are you represented by an attorney? YES ___ NO ___ If yes, what is his/her name? _____

Do you have a Commercial Driver's License (CDL)? YES ___ NO ___ I DON'T KNOW ___

Do you have an outstanding balance on a court case, or any traffic tickets in any other county or state? YES ___ NO ___

****All outstanding balances MUST be paid in full prior to Pretrial Diversion acceptance.****

Have you **ever** applied to a Pretrial Diversion Program in any state? YES ___ NO ___

If yes, Where/when? _____ What offense? _____

Have you ever been granted Youthful Offender in any state? YES ___ NO ___ I DON'T KNOW ___

If yes, Where/when? _____ What charge? _____

Are you currently on probation or parole? YES ___ NO ___ I DON'T KNOW ___

If yes, Where/since when: _____ What offense(s): _____

What items were confiscated at the time of arrest? _____

List ALL charges arising out of the arrest about which you are applying for the Pretrial Diversion Program.

****FAILURE TO LIST A CASE/CHARGE WILL RESULT IN THAT CASE/CHARGE NOT BEING PLACED IN THE DIVERSION PROGRAM.**

Case Number: _____ Charge: _____ Agency: _____

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Case Number: _____ Charge: _____ Agency: _____

Case Number: _____ Charge: _____ Agency: _____

Case Number: _____ Charge: _____ Agency: _____

Do you have **any** other charges pending? **YES** _____ **NO** _____

Case Number: _____ Charge: _____ Agency: _____

Case Number: _____ Charge: _____ Agency: _____

Case Number: _____ Charge: _____ Agency: _____

Have you **ever been arrested** for any crime, including DUI and minor traffic offenses? **Yes** _____ **No** _____

***All prior cases MUST be paid in full, and all requirements must be fulfilled before acceptance to Pretrial Diversion.**

List those below:

Case Number: _____ Charge: _____ Agency: _____

Case Number: _____ Charge: _____ Agency: _____

Case Number: _____ Charge: _____ Agency: _____

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 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.

Attorney’s Signature

Printed Name

Date

I, _____, counsel for the Defendant, have read and thoroughly explained to the Defendant this document; the rules and requirements of the Lee County District Attorney’s Pretrial Diversion Program as set forth herein; and the ramification and results of non-compliance with these terms by the Defendant.

By submitting this application, the Attorney of record is agreeing to cooperate with the court, the CRO, and all treatment providers and to maintain contact with the applicant and to further assist the applicant in obtaining and maintaining compliance by the applicant with all terms of the program.

Attorney’s Signature

Printed Name

Date