

PERSONAL REFERENCE

_____	_____
NAME	ADDRESS
_____	_____
TELEPHONE	RELATION TO DEFENDANT

LEGAL HISTORY

1. List name and address of your attorney. If you are representing yourself, please indicate so.

2. Have you ever been convicted of a crime? YES NO
If so, state when, where and charge _____

3. Have you ever had a prior criminal diversion? YES NO
If so, state when, where and charge _____

4. List all prior traffic convictions by date, place, and charge:

5. List all prior traffic diversions by date, place, and charge:

6. Are you currently on probation or parole? YES NO
If so, list when, where, charge and supervising officer: _____

7. Do you currently have traffic or criminal charges pending against you in another court? YES NO
If so, list charge, place and case number(s) _____

8. Do you currently owe fines in any court? YES NO
If so, list amount and the court: _____

NEXT OF KIN (WITH A PERMANENT ADDRESS) NOT LIVING WITH YOU:

_____	_____
NAME	ADDRESS
_____	_____
TELEPHONE	RELATION TO DEFENDANT

STATE IN YOUR OWN WORDS WHY THE CHARGES AGAINST YOU HAVE BEEN FILED.

I hereby apply for status as a participant in the diversion program and request that the City of Bentley Prosecuting Attorney temporarily delays trial against me in order to permit consideration of this application. I understand that the final decision to commence criminal proceedings or to defer prosecution in my case rests entirely with the City Prosecuting Attorney.

I authorize the City of Bentley Prosecuting Attorney's office to conduct an investigation to determine my suitability for the program. I understand that any information furnished by me or authorized by me to be furnished to the investigation in connection with its investigation will be kept confidential.

A false answer to any question in this application may be grounds for recommendation against placement into this program, in which case, the Prosecuting Attorney will resume prosecution of the original charges.

Applicant Signature _____ Date _____

I authorize the City Prosecuting Attorney to conduct a background check of my past employment record and I authorize my present and previous employers to furnish the City Attorney with any information they request.

Applicant Signature _____ Date _____