

Office of the District Attorney
18th Judicial District of Kansas
Pre-Trial Diversion
1900 E. Morris, Wichita, Kansas 67211

APPLICATION FOR DUI PRETRIAL DIVERSION PROGRAM

All questions must be answered. After completing the application below, please return it to the Diversion Office with the **\$45.00 non-refundable Criminal History Fee**, which must be in the form of a MONEY ORDER, CASHIER'S CHECK, or ATTORNEY'S TRUST ACCOUNT CHECK made payable to the District Attorney. **NOTE:** This application **MUST** be filed within thirty (30) days of the **INITIAL** court date. **A \$15.00 fee must accompany request for waiver of the time requirement if the application is not filed timely.** If you are determined to be eligible based on your criminal history check, a **\$45.00 application fee will be due within 2 weeks of notification of eligibility.** Payment for both the non-refundable Criminal History Fee and non-refundable Application Fee may be submitted at the same time, in one payment, if the defendant chooses.

SECTION I
PERSONAL INFORMATION

Print Name:		Phone No.:	
Maiden name or other names used:		SS#:	
Address:		E-mail:	
City:	State:	Zip Code:	
Date of Birth:	Age:	Race:	Sex:
How long have you lived at this address:		Who do you live with?	
Driver's License Number:		State of Issuance:	
Defense Attorney:		Phone Number:	
Defense Attorney Address:			
Are you a United States citizen or legal alien?			
Proof of citizenship or legal alien residency is required. Noncitizens must have entered the United States lawfully and in accordance with the requirements of the U.S. Citizenship and Immigration Services (USCIS) and provide verification of residency status, e.g. valid work permit, visa or green card if approved for the Diversion program.			
City and State where born:			
In what other cities and states have you lived?			
City	State	Dates lived there	
Marital Status:		Spouse's Name:	
Nearest Contact Name:			
Relationship to Defendant:		Phone No.:	
Address:			

FOR DIVERSION USE ONLY

Application Fee:	Date Received:
Disposition Date:	Case No.:
Alcohol Evaluation:	Initial Court Date:

Number of Minor Dependents:	
Names	Ages

**SECTION II
EDUCATION**

Do you have a high school diploma or GED? Yes No

Educational and Vocational Training (include high school or highest grade completed if not high school graduate as well as education beyond high school):

**SECTION III
INSURANCE**

Insurance Information: (Attach copy of proof of motor vehicle insurance.)

Name of Insurance Company:

Policy No.:	Expiration Date:
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**SECTION IV
TREATMENT HISTORY**

Have you ever attended Alcohol or Drug treatment or counseling or received an assessment for possible drug or alcohol problems? Yes No

If **yes** state when, where and the reason for attendance or assessment:

**SECTION V
EMPLOYMENT**

Military Service <input type="radio"/> Yes <input type="radio"/> No	Branch:
Type of Discharge:	Date of Discharge:
Present Employment <input type="checkbox"/> Check if unemployed	
Employer:	Phone No.
Address:	
Dates Employed _____ to _____	Occupation:
Salary:	
Past Employment: (List employment for the past six years. Begin with last employer. If you need more space use blank sheet of paper.)	
Employer:	Phone No.:
Address:	
Dates Employed _____ to _____	Occupation:
Reason Left:	
Employer:	Phone No.:
Address:	
Dates Employed _____ to _____	Occupation:
Reason Left:	

**SECTION VI
INCOME**

Defendant's Employment:	\$ _____ Per Month	Public Assistance:	\$ _____ Per Month
Spouse's Employment:	\$ _____ Per Month	Other:	\$ _____ Per Month
Unemployment Compensation:	\$ _____ Per Month		

If **other** please specify source:

**SECTION VII
OFFENSE RECORD**

Prior Traffic Offense Record: (List **all** Juvenile and Adult traffic incidents, DUI or DWI Arrests, Diversions, Deferred Prosecutions, Convictions and Expungements in Kansas or other states including those not resulting in formal charges or convictions. Include date of arrest, citation or incident, arresting or ticketing agency, charge and disposition.)

Prior Criminal Offense Record: (List **all** Juvenile and Adult incidents, Arrests, Citations, Prosecutions, Convictions, Expungements, Diversions or Deferred Prosecution Agreements in Kansas or other states including those not resulting in formal charges or convictions. Include date of incident involved, agency, charge, and disposition.)

State the circumstances which led to the offense with which you are charged:

**SECTION VIII
ADDITIONAL INFORMATION**

Please check the appropriate answer for each of the following questions

Have you lived in your current residence for a year or more?	<input type="radio"/> Yes	<input type="radio"/> No
Have you worked at your current job for a year or more?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have a high school diploma or GED?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have outstanding court fines, restitution or child support?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have outstanding bills or debt?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have a valid driver's license?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have any pending court cases besides this case?	<input type="radio"/> Yes	<input type="radio"/> No
Do you have support (monetary or emotional) from family members?	<input type="radio"/> Yes	<input type="radio"/> No
Have you suffered prior legal consequences due to alcohol or drug use?	<input type="radio"/> Yes	<input type="radio"/> No
Have you ever been diagnosed with a mental illness?	<input type="radio"/> Yes	<input type="radio"/> No
Do you feel that you have been charged fairly in this case?	<input type="radio"/> Yes	<input type="radio"/> No
Have you ever been convicted of a criminal offense (including juvenile)?	<input type="radio"/> Yes	<input type="radio"/> No

