

DRUG / DUI COURT APPLICATION

Please answer each question honestly by circling Yes or No. If you require assistance in answering these questions, please speak with your defense attorney.

*NAME: _____ DOB: _____

*PHONE # _____ *Email Address: _____

HOME ADDRESS: _____
Street, City, State, Zip

CASE NUMBER(S): _____

DEFENSE ATTORNEY NAME: _____

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|--|-----|----|
| 1. Are you living outside of Davis County? | YES | NO |
| 2. Are you homeless? | YES | NO |
| 3. Have you previously participated in the Drug/DUI Court program in Davis County or in any other County/Jurisdiction within the last 2 years? | YES | NO |
| 4. Have you previously participated in the RSAT/CATS program within the last 2 years? | YES | NO |
| 5. Are you prescribed and taking any narcotic medication? | YES | NO |
| 6. Are you currently serving a commitment on another case? | YES | NO |
| 7. Do you have any open/pending cases including pending OTSC in other Jurisdictions?
If yes, what is/are the case number(s): | YES | NO |
| 8. Do you have any outstanding warrants? | YES | NO |
| 9. Have you ever been convicted of an offense that involved the use of a gun or other dangerous weapon or caused serious bodily injury? | YES | NO |
| 10. Have you ever been convicted of a felony sex offense, or a registerable misdemeanor sex offense? | YES | NO |
| 11. Are you currently on parole? | YES | NO |

****Restitution is to be calculated and stipulated to PRIOR to referring case to Drug/DUI Court.**