

COURT ORDERED PROBATION SERVICES

NAME _____ CASE NUMBERS _____

ADDRESS _____

TELEPHONE _____ SOS SEC NO _____

ACTION ORDERED:

_____ Must Go to TASC

DEFENDANT MUST REPORT IN PERSON TO:

_____ Pre-Sentence Investigation

TASC

STATE PROBATION OFFICE

_____ Probation Investigation

401 Beacon Pkwy West

2112 12th Avenue North

_____ Youthful Offender Investigation

Birmingham, Al 35233

Birmingham, Al 35235

_____ Notice of Conviction

Telephone (205) 917-3780

Telephone (205) 323-1091

_____ Update Previous Investigative Report

() JAIL

_____ Other _____

() BOND

CHARGES _____ CONVICTED _____

DATE OF CONVICTION OR PLEA _____

SENTENCE _____ SENTENCE DEFERRED UNTIL HEARING DATE ()

Sentence _____ Penitentiary _____ Hard Labor _____ Jail _____ FLYC

Race _____ White _____ Black; Other _____ Sex _____ Male _____ Female

Birthdate _____ Age _____ Married _____ Single _____

Health _____ Good _____ Fair _____ Bad Occupation _____

() Defendant Refused to Provide Information Requested

REFERENCE:

Wife or Husband _____ Phone _____

Address _____

Parent _____ Phone _____

Address _____

Other Reference _____ Phone _____

Address _____

The Action ordered in the above style cause is hereby set for hearing on _____

_____, 20____ at _____ a.m. p.m.

ATTORNEY'S SIGNATURE

CIRCUIT OR DISTRICT JUDGE

DISTRICT ATTORNEY

DEFENDANT'S SIGNATURE

STATE OF ALABAMA

vs.

Defendant's Copy
"COURT'S EXHIBIT A"
 (Youthful Offender)

IN THE CIRCUIT COURT OF
 THE
 TENTH JUDICIAL CIRCUIT
 OF ALABAMA

Defendant

TO THE ABOVE NAMED DEFENDANT:

Case No. _____

This is to inform you of your rights as a defendant in this criminal case. Under the indictment returned against you in this case by the Grand Jury of Jefferson County, Alabama, you are charged with the crime of _____, which if you were tried as an adult would be a felony offense. As a felony, the law provides for punishment by imprisonment in the penitentiary for not less than _____ nor more than _____ for such offense. However, you are now charged with being a youthful offender rather than the offense charged in the indictment. If you plead guilty to being a youthful offender, you may receive punishment of up to three years imprisonment in the custody of the State Department of Corrections and in addition may be fined in an amount up to \$_____.

Under the constitutions of the United States and of the State of Alabama, you have a right or privilege not to be compelled to give evidence against yourself. As a youthful offender, upon the trial in your case, you would be tried by the court without a jury. You have the right to take the witness stand and to testify on your own behalf, if you so desire, but no one could require you to so testify. If you testified, you could be cross-examined by the state. If you do not testify, no one could even comment to the court as to your failure to testify. You have the right to remain absolutely silent, but anything that you voluntarily say, with knowledge of your rights, may be used against you. Your conversations with your attorney are confidential and cannot, and will not, be disclosed by your attorney.

You have the right to stand on your plea of not guilty, and the right to a public trial before the court without a jury. Upon a trial, the court would determine whether you are guilty or whether you are innocent, based upon the evidence in the case.

In the trial of your case your attorney could subpoena witnesses on your behalf, make legal objections to matters that he felt were objectionable, cross-examine the witnesses of the state, examine your own witnesses, and argue the matter before the court. He would be bound to do everything that he could honorably and reasonably do to see that you obtain a fair and impartial trial. You have the right to have witnesses subpoenaed to testify as to pertinent facts in your favor.

In the trial of your case, you would come into court clothed with a presumption that you are not guilty and this presumption of innocence would follow you throughout the course of the trial until the evidence produced by the state convinced the court beyond a reasonable doubt of your guilt. The burden of proof is upon the State of Alabama to convince the court from the evidence in the case that you are guilty beyond a reasonable doubt before the court would be authorized to find you guilty. If the State did not meet such burden of proof, it would be the court's duty to find you not guilty. You will have no burden of proof whatsoever in your trial.

To the charges set forth in the indictment you have the right to enter a plea of guilty, not guilty, not guilty by reason of insanity or any other special plea. You will enter a plea of guilty only if you are actually guilty of said crime and if you do not desire a trial. If a plea of guilty there will be no trial, as has been heretofore explained to you.

Your attorney will go over these rights with you, but if you have any questions about any of them, please ask the undersigned judge and he will be happy to make further explanation thereof to you.

This the _____ day of _____, _____.

 Circuit Judge of Tenth Judicial Circuit of Alabama

Comes the defendant in the above-styled cause and states to the court that he has read, or has had read to him, the matters and things hereinabove set forth; that his attorney has thoroughly gone over said matters and things with him and that he, the defendant, thoroughly understands them; that he is not under the influence of any drugs, medicines or alcoholic beverages and has not been threatened or abused or offered any inducement or reward to get him to plead guilty. Defendant further states to the court that he desires to plead guilty to the charge of being a youthful offender in this case.

This the _____ day of _____, _____.

 Defendant

Comes the attorney for the above-styled defendant and certifies that the above and foregoing rights were read by the defendant in my presence, or were read to him by me, that I discussed such rights with the defendant, in detail, and that a written copy of the above rights were given to the defendant for him to keep, use and study.

This the _____ day of _____, _____.

 Attorney for Defendant

Filed in Office this _____ day of _____, _____.

_____, Circuit Clerk

State Of Alabama Unified Judicial System Form CR-51 (front) Rev. 1/2019	EXPLANATION OF RIGHTS AND PLEA OF GUILTY (Non-Habitual Offender – Felony and Misdemeanor – Circuit or District Court) (FOR OFFENSES COMMITTED ON OR AFTER January 30, 2016)	Case Number
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IN THE _____ COURT OF _____, ALABAMA
 (Circuit or District) (Name of County)
 STATE OF ALABAMA v. _____
 Defendant

TO THE ABOVE-NAMED DEFENDANT: The Court, having been informed that you wish to enter a plea of guilty in this case, hereby informs you of your rights as a defendant charged with a criminal offense.

PENALTIES APPLICABLE TO YOUR CASE

You are charged with the crime of _____, which is a Class _____
☐ Felony ☐ Misdemeanor. The Court has been informed that you desire to enter a plea of guilty to ☐ this offense or ☐ to the crime of _____ which is a ☐ felony ☐ misdemeanor offense. The sentencing range for the above crime(s) is set out below:

MISDEMEANOR		FELONY	
Class A	Up to one (1) year imprisonment in the county jail, or a fine up to \$6,000, or both.	Class A	Not less than ten (10) years and not more than life or ninety-nine (99) years imprisonment in the state penitentiary, and may include a fine not to exceed \$60,000
Class B	Up to six (6) months imprisonment in the county jail, or a fine up to \$3,000, or both.	Class B	Not less than two (2) years and not more than twenty (20) years imprisonment in the state penitentiary, and may include a fine not to exceed \$30,000.
Class C	Up to three (3) months imprisonment in the county jail, or a fine not to exceed \$500, or both.	Class C	Not less than one (1) year and one (1) day and not more than ten (10) years imprisonment in the state penitentiary, and may include a fine not to exceed \$15,000*.
		Class D	Not More than 5 years or less than 1 year and 1 day in the state penitentiary and may include a fine not to exceed \$7,500*.

Multiple Sentences. If you face multiple sentences for multiple crimes, the court may order your sentence for the above crime to run consecutively to or concurrently with the other sentence or sentences.

Costs & Crime Victim's Assessment: You will also be ordered to pay the costs of court, which may include the fees of any appointed attorney, fines, fees, assessments, and restitution if there is any. You will also be ordered to pay an additional monetary penalty for the use and benefit of the Alabama Crime Victims Compensation Commission of not less than \$50 and not more than \$10,000 for each felony and not less than \$25 and not more than \$1,000 for each misdemeanor for which you are convicted.

This crime is also subject to the following enhancements or additional penalties as provided by law: (Provisions Checked Apply To Your Case)

- ☐ **Enhanced Punishment For Use Of Firearm Or Deadly Weapon:** Sections 13A-5-6(a)(5) and (a)(6), Ala. Code 1975, provide for the enhancement of a punishment for a Class A, B, or C, felony in which a "firearm or deadly weapon was used or attempted to be used in the commission of the felony." This section provides for the following punishments in such events: For the commission of a Class A Felony, a term of imprisonment of not less than 20 years; For the commission of a Class B or C Felony, a term of imprisonment of not less than 10 years.
- ☐ **Enhanced Punishment for a Felony Criminal Sex Offense Involving a Child:** Sections 13A-5-6(a)(5) and (a)(6), Ala. Code 1975, provide for the enhancement of a punishment for a Class A or B felony criminal sex offense involving a child under the age of 12 or involving child pornography. These Sections provide for the following punishment in such events: For a Class A felony criminal sex offense, not less than 20 years; For a Class B felony sex offense, not less than 10 years.
- ☐ **Enhanced Punishment for Drug Sale Near School:** Section 13A-12-250, Ala. Code 1975, provides that any person who is convicted of unlawfully selling any controlled substance within a three (3) mile radius of a public or private school, college, university or other educational institution, must be punished by an additional penalty of five years' imprisonment for each violation.
- ☐ **Enhanced Punishment for Drug Sale Near Housing Project:** Section 13A-12-270, Ala. Code 1975, provides that any person who is convicted of unlawfully selling any controlled substance within a three (3) mile radius of a public housing project owned by a housing authority must be punished by an additional penalty of five years' imprisonment in a state correctional facility for each violation.
- ☐ **Enhanced Punishment For Sales Of Controlled Substance To One Under the age of 18:** Section 13A-12-215, Ala. Code 1975, provides that anyone convicted of selling, furnishing or giving away a controlled substance to one who has not yet attained the age of 18 years, shall be guilty of a Class A Felony and the punishment imposed shall not be suspended or probation granted.

*** Class C and D felonies Split Sentencing** Section 15-18-8(b) and (e), Ala. Code 1975, provides that when a defendant is convicted of an offense that constitutes a Class C or D felony and receives a sentence of not more than 15 years, and has not been sentenced to probation, drug court, or a pretrial diversion program, he or she shall be confined in a prison, jail-type institution, treatment institution, or community corrections program for a Class C felony offense or in a consenting community corrections program for a Class D felony offense for a period not exceeding two years. The execution of the remainder of the sentence shall be suspended and he or she shall be placed on probation for a period not exceeding three years and upon such terms as the court deems best. If no community corrections program exists within a county or jurisdiction and no alternative program options are available, a person convicted of an offense that constitutes a Class D felony may be sentenced to high-intensity probation under the supervision of the Board of Pardons and Paroles in lieu of community corrections.

EXPLANATION OF RIGHTS AND PLEA OF GUILTY
(Non-Habitual Offender – Felony and Misdemeanor – Circuit or District Court)
(FOR OFFENSES COMMITTED ON OR AFTER January 30, 2016)

***Enhanced Punishment for Class D felonies**

Note that Section 15-18-8 also provides that in all cases when it is shown that a defendant has been previously convicted of any three or more felonies or has been previously convicted of any two or more felonies that are Class A or Class B felonies, and after such convictions has committed a Class D felony, upon conviction, he or she must be punished for a Class C felony.

- ☐ **Drug Demand Reduction Assessment Act and Loss of Driving Privileges:** Section 13A-12-281 provides that any person convicted of a violation of Sections 13A-12-202, 13A-12-203, 13A-12-204, 13A-12-211, 13A-12-212, 13A-12-213, 13A-12-215 or 13A-12-231, Ala. Code 1975, shall be assessed an additional penalty of \$1,000 if he or she is a first-time offender or \$2,000 if he or she is a repeat offender under one of these sections. Collection of all or part of the penalty will be suspended if, with court approval, the defendant enters a drug rehabilitation program and if the defendant agrees to pay for a part or all of the program costs. Upon successful completion of the program, the defendant may apply to the court to reduce the penalty by the amount actually paid by him or her for participation in the program. Any suspension of the penalty can be withdrawn by the court if the defendant fails to enroll in or successfully pursue or otherwise fail to complete an approved program. **Loss of Driving Privileges:** Pursuant to Section 13A-12-291, Ala. Code 1975, a driver's license shall be suspended for six months for a conviction for any of the following: attempting to commit, criminally conspiring to commit, criminal solicitation to commit, or committing the crime of trafficking in specified substances under Section 13A-12-231; attempting to commit, criminal solicitation to commit, or committing the crime of unlawful possession with intent to distribute a controlled substance under subsections (c) and (d) of Section 13A-12-211. Suspension of a driver's license for a conviction of driving under the influence of a controlled substance or under the combined influence of a controlled substance and alcohol shall be governed by Section 32-5A-191, the DUI law.
- ☐ **Alcohol/Drug Related Offenses:** A person convicted of an alcohol or drug-related offense will be required to undergo an evaluation for substance abuse. Based upon the results of any such evaluation, he or she will be required to complete the recommended course of education and/or treatment and to pay for the evaluation and any program to which the defendant is referred. Failure to submit to an evaluation or failure to complete any program to which the defendant may be referred will be considered a violation of any probation or parole he or she may be granted. The defendant may also be required to attend monitoring sessions, including random drug and alcohol testing or blood, urine and/or breath tests and to pay a fee for this service. The defendant may request a waiver of part or all of the fees assessed if he or she is indigent or for any portion of time he or she is financially unable to pay. Community service may be ordered by the court in lieu of the monetary payment of fees by an indigent.
- ☐ **Enhanced Punishment for a Criminal Sex Offense:** A person convicted of a sex offense is required to comply with the requirements of the Alabama Sex Offender Registration and Notification Act (Section 15-20A-1, et seq., Ala. Code, 1975).
- ☐ **Drug Trafficking Offenses:** Convictions for an offense under §13A-12-231, Code of Alabama 1975, include mandatory minimum terms of incarceration and a mandatory fine. Convictions for drug trafficking while in possession of a firearm includes an additional mandatory period of incarceration of 5 years and a mandatory fine of \$25,000.
- ☐ **DUI Offenses:** Pursuant to 32-5A-191.4, Code of Alabama 1975, persons convicted of driving under the influence are subject to installation of an ignition interlock devices on motor vehicles. Pursuant to Section 32-5A-191, Ala. Code 1975, a conviction for driving under the influence carries a mandatory driver's license suspension.
- ☐ **Drug Possession:** If any person is convicted in any court of this state for drug possession, drug sale, drug trafficking, or drug paraphernalia offenses as defined in Section 13A-12-211 to 13A-12-260, inclusive, Ala. Code 1975, an additional fee of \$100.00 will be assessed pursuant to Section 36-18-7, Ala. Code 1975.
- ☐ **Other:** _____

RIGHTS YOU HAVE AND THE WAIVER OF YOUR RIGHTS

Under the Constitution of the United States and the Constitution and laws of the State of Alabama, you have a right to remain silent and you may not be compelled to give evidence against yourself. Your attorney cannot disclose any confidential talks he/she has had with you. You do not have to answer any questions. If you do answer questions knowing that you have a right to remain silent, you will have waived this right.

You have the right to enter, or stand on if previously entered, a plea of "Not Guilty" or "Not Guilty by Reason of Mental Disease or Defect," or "Not Guilty and Not Guilty by Reason of Mental Disease or Defect" and have a public trial before a duly selected jury. The jury would decide your guilt or innocence based upon the evidence presented before them. If you elect to proceed to trial, you would have the right to be present, you would have the right to have your attorney present to assist you, you would have the right to confront and cross examine your accuser(s) and all the State's witnesses, you would have the right to subpoena witnesses to testify on your behalf and to have their attendance in court and their testimony required by the court, and you would have the right to take the witness stand and to testify, but only if you chose to do so, as no one can require you to do this. If you elect to testify, you can be cross examined by the State just as any other witness is subject to cross examination. If you elect not to testify, no one but your attorney will be allowed to comment about that fact to the jury. Your attorney is bound to do everything he/she can honorably and reasonably do to see that you obtain a fair and impartial trial.

If you elect to proceed to trial, you come to court presumed to be innocent. This presumption of innocence will follow you throughout the trial until the State produces sufficient evidence to convince the jury (or the court if the trial is non-jury) of your guilt beyond a reasonable doubt. You have no burden of proof in this case. If the State fails to meet its burden, you would be found not guilty.

If you are entering a guilty plea to a charge for which you have not yet been indicted, you are waiving indictment by a grand jury and you will be pleading guilty to a charge preferred against you by a District Attorney's Information filed with the court.

If you are not a United States citizen, a guilty plea may subject you to adverse immigration consequences, including deportation (see 8 U.S.C. § 1227), exclusion from reentry to the United States and amnesty, and that the appropriate consulate may be informed of the plea and conviction.

Pursuant to Section 15-22-27.3, Ala. Code 1975, if you are pleading guilty to a sex offense involving a child as defined in Section 15-20A-4, Ala. Code 1975, which constitutes a Class A or B felony, you will not be eligible for parole.

If you are convicted of a misdemeanor crime of domestic violence, which has, as an element, the use or attempted use of physical force, or the threatened use of a deadly weapon, against your current or former spouse; your child of whom you are a parent or guardian; a person with whom you share a child in common; a spouse, parent, or guardian with whom you are, or have been, cohabiting or to whom you are similarly situated, and you ship or transport in interstate or foreign commerce, or possess in or affecting commerce, any firearm or ammunition, or if you receive any firearm or ammunition which has been shipped or transported in interstate or foreign commerce, YOU ARE SUBJECT TO BEING PROSECUTED IN FEDERAL COURT FOR VIOLATING 18 U.S.C. § 922(g)(9).

If you plead guilty, there will be no trial. You will be waiving the rights outlined above, except your rights relating to representation by an attorney. The state will have nothing to prove and you will stand guilty on your guilty plea. By entering a plea of guilty, **YOU WILL ALSO WAIVE YOUR RIGHT TO APPEAL**, unless in appeals to the Court of Criminal Appeals or the Supreme Court (1) you have, before entering the plea of guilty, expressly reserved the right to appeal with respect to a particular issue or issues, in which event appellate review shall be limited to a determination of the issue or issues reserved, or (2) you have timely filed a motion to withdraw the plea of guilty after pronouncement of sentence on the ground that the withdrawal is necessary to correct a manifest injustice, and the court has denied your motion to withdraw your plea, or the motion has been deemed denied by operation of law.

EXPLANATION OF RIGHTS AND PLEA OF GUILTY
(Non-Habitual Offender – Felony and Misdemeanor – Circuit or District Court)
(FOR OFFENSES COMMITTED ON OR AFTER January 30, 2016)

IF YOU HAVE A RIGHT TO APPEAL UNDER ONE OF THE CONDITIONS ABOVE AND YOU ARE DETERMINED BY THE COURT TO BE INDIGENT, COUNSEL WILL BE APPOINTED TO REPRESENT YOU ON APPEAL IF YOU SO DESIRE AND IF THE APPEAL IS FROM A CIRCUIT COURT JUDGMENT OR SENTENCE. A COPY OF THE RECORD AND REPORTER'S TRANSCRIPT WILL BE PROVIDED AT NO COST TO YOU. IF THE APPEAL IS FROM A MUNICIPAL OR DISTRICT COURT JUDGMENT TO CIRCUIT COURT, YOU HAVE A RIGHT TO DEMAND A JURY TRIAL IF YOU INDICATE YOUR WISH TO ASSERT THIS RIGHT ON THE NOTICE OF APPEAL.

IF YOU HAVE ANY QUESTIONS ABOUT YOUR RIGHTS OR THE CONSEQUENCES OF PLEADING GUILTY, PLEASE LET THE COURT KNOW NOW AND FURTHER EXPLANATION WILL BE MADE.

The court having personally addressed the defendant determines that the defendant has entered the plea voluntarily.

Date

Judge

ATTORNEY'S CERTIFICATE

I certify that the above was read and/or explained to the defendant by me; that I explained the penalty or penalties to the defendant, that I discussed in detail the defendant's rights and the consequences of pleading guilty; and that, in my judgment, the defendant understands the same and that he/she is knowingly, voluntarily, and intelligently waiving his/her rights and entering a voluntary and intelligent plea of guilty. I further certify to the court that I have in no way forced or induced the defendant to plead guilty and, to my knowledge, no one else has done so.

Date

Attorney

DEFENDANT'S STATEMENT OF WAIVER OF RIGHTS AND PLEA OF GUILTY

I certify to the court that I have read the matters set forth above or have had them read to me; that my rights have been discussed with me in detail and fully explained; that I understand the charge or charges against me; that I understand my rights, the punishment or punishments provided by law as may apply to my case, and I understand the consequence of pleading guilty; that I am not under the influence of any drugs, medicines, or alcoholic beverages; and I have not been threatened or abused or offered any inducement, reward, or hope of reward to plead guilty other than the terms of the plea agreement which will be stated on the record.

I further state to the court that I am guilty of the charge to which I am entering a plea of guilty, that I desire to plead guilty, that I made up my own mind to plead guilty, and that I knowingly, intelligently, and voluntarily waive my right to a trial in this case. I further state to the court that I am satisfied with my attorney's services and his/her handling of my case.

Date

Defendant

EXPLANATION OF RIGHTS AND PLEA OF GUILTY
(Habitual Felony Offender – Circuit/District Court)

- ☐ **Enhanced Punishment for a Felony Criminal Sex Offense Involving a Child:** Sections 13A-5-6(a)(5) and (a)(6), Ala. Code 1975, provide for the enhancement of a punishment for a Class A or B felony criminal sex offense involving a child under the age of 12 or involving child pornography. These Sections provide for the following punishment in such events: For a Class A felony criminal sex offense, not less than 20 years; For a Class B felony sex offense, not less than 10 years.
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- ☐ **Enhanced Punishment for Drug Sale Near Housing Project:** Section 13A-12-270, Ala. Code 1975, provides that any person who is convicted of unlawfully selling any controlled substance within a three (3) mile radius of a public housing project owned by a housing authority must be punished by an additional penalty of five years imprisonment in a state correctional facility for each violation.
- ☐ **Enhanced Punishment for Sales of Controlled Substance to One Under the age of 18:** Section 13A-12-215, Ala. Code 1975, provides that anyone convicted of selling, furnishing or giving away a controlled substance to one who has not yet attained the age of 18 years, shall be guilty of a Class A Felony and the punishment imposed shall not be suspended or probation granted.
- ☐ **Drug Demand Reduction Assessment Act and Loss of Driving Privileges:** Section 13A-12-281 provides that any person convicted of a violation of Sections 13A-12-202, 13A-12-203, 13A-12-204, 13A-12-211, 13A-12-212, 13A-12-213, 13A-12-215 or 13A-12-231, Ala. Code 1975, shall be assessed an additional penalty of \$1,000 if he or she is a first-time offender or \$2,000 if he or she is a repeat offender under one of these sections. Collection of all or part of the penalty will be suspended if, with court approval, the defendant enters a drug rehabilitation program and if the defendant agrees to pay for a part or all of the program costs. Upon successful completion of the program, the defendant may apply to the court to reduce the penalty by the amount actually paid by him or her for participation in the program. Any suspension of the penalty can be withdrawn by the court if the defendant fails to enroll in or successfully pursue or otherwise fail to complete an approved program. Loss of Driving Privileges: Pursuant to Section 13A-12-291, Ala. Code 1975, a driver's license shall be suspended for six months for a conviction for any of the following: attempting to commit, criminally conspiring to commit, criminal solicitation to commit, or committing the crime of trafficking in specified substances under Section 13A-12-231; attempting to commit, criminal solicitation to commit, or committing the crime of unlawful possession with intent to distribute a controlled substance under subsections (c) and (d) of Section 13A-12-211. Suspension of a driver's license for a conviction of driving under the influence of a controlled substance or under the combined influence of a controlled substance and alcohol shall be governed by Section 32-5A-191, the DUI law.
- ☐ **Alcohol/Drug Related Offenses:** A person convicted of an alcohol or drug-related offense will be required to undergo an evaluation for substance abuse. Based upon the results of any such evaluation, he or she will be required to complete the recommended course of education and/or treatment and to pay for the evaluation and any program to which the defendant is referred. Failure to submit to an evaluation or failure to complete any program to which the defendant may be referred will be considered a violation of any probation or parole he or she may be granted. The defendant may also be required to attend monitoring sessions, including random drug and alcohol testing or blood, urine and/or breath tests and to pay a fee for this service. The defendant may request a waiver of part or all of the fees assessed if he or she is indigent or for any portion of time he or she is financially unable to pay. Community service may be ordered by the court in lieu of the monetary payment of fees by an indigent.
- ☐ **Enhanced Punishment for a Criminal Sex Offense:** A person convicted of a sex offense is required to comply with the requirements of the Alabama Sex Offender Registration and Notification Act (Section 15-20A-1, et seq., Ala. Code, 1975).
- ☐ **Drug Trafficking Offenses:** Convictions for drug trafficking while in possession of a firearm includes an additional mandatory period of incarceration of 5 years and a mandatory fine of \$25,000.
- ☐ **DUI Offenses:** Pursuant to 32-5A-191.4, Code of Alabama 1975, persons convicted of driving under the influence are subject to installation of an ignition interlock devices on motor vehicles. Pursuant to Section 32-5A-191, Ala. Code 1975, a conviction for driving under the influence carries a mandatory driver's license suspension.
- ☐ **Drug Possession:** If any person is convicted in any court of this state for drug possession, drug sale, drug trafficking, or drug paraphernalia offenses as defined in Section 13A-12-211 to 13A-12-260, inclusive, Ala. Code 1975, an additional fee of \$100.00 will be assessed pursuant to Section 36-18-7, Ala. Code 1975.
- ☐ **Other:**

EXPLANATION OF RIGHTS AND PLEA OF GUILTY
(Habitual Felony Offender – Circuit/District Court)

RIGHTS YOU HAVE AND WAIVER OF YOUR RIGHTS

Under the Constitution of the United States and the Constitution and laws of the State of Alabama, you have a right to remain silent and you may not be compelled to give evidence against yourself. Your attorney cannot disclose any confidential talks he/she has had with you. You are not required to answer any questions. If you do answer questions knowing that you have a right to remain silent, you will have waived this right. You have the right to enter, and continue to assert, a plea of "Not Guilty" or "Not Guilty by Reason of Mental Disease or Defect", and have a public trial before a duly selected jury. The jury would decide your guilt or innocence based upon the evidence presented before them. If you elect to proceed to trial, you would have the right to be present, you would have the right to have your attorney present to assist you, you would have the right to confront and cross examine your accuser(s) and all the State's witnesses, you would have the right to subpoena witnesses to testify on your behalf and to have their attendance in court and their testimony required by the court, and you would have the right to take the witness stand and to testify, but only if you choose to do so, as no one can require you to do this. If you elect to testify, you can be cross examined by the State, just as any other witness is subjected to cross examination. If you decide not to testify, no one but your attorney will be allowed to comment about that fact to the jury. Your attorney is bound to do everything he/she can honorably and reasonably do to see that you obtain a fair and impartial trial.

If you elect to proceed to trial, you come to court presumed to be innocent. This presumption of innocence will follow you throughout the trial until the State produces sufficient evidence to convince the jury (or the court if the trial is non-jury) of your guilt beyond a reasonable doubt. You have no burden of proof in this case. If the State fails to meet its burden, you would be found not guilty. If you are entering a guilty plea to a charge for which you have not yet been indicted, you are waiving indictment by a grand jury and you will be pleading guilty to a charge preferred against you by a District Attorney's Information filed with the court.

If you are not a United States citizen, a guilty plea may subject you to adverse immigration consequences, including deportation (See 8 U.S.C. §1227), exclusion from reentry to the United States and amnesty, and that the appropriate consulate may be informed of the plea and conviction.

If you plead guilty, there will be no trial. You will be waiving your rights outlined above, except your rights relating to representation by an attorney. The state will have nothing to prove and you will stand guilty on your guilty plea. By entering a plea of guilty, **YOU WILL ALSO WAIVE YOUR RIGHT TO APPEAL**, unless in appeals to the Court of Criminal Appeals or the Supreme Court (1) you have before entering the plea of guilty, expressly reserved the right to appeal with respect to a particular issue or issues, in which event appellate review shall be limited to a determination of the issue or issues reserved, (2) you have timely filed a motion to withdraw the plea of guilty after pronouncement of sentence on the ground that the withdrawal is necessary to correct a manifest injustice, and the court has denied your motion to withdraw your plea, or the motion has been deemed denied by operation of law.

IF YOU HAVE A RIGHT TO APPEAL UNDER ONE OF THE CONDITIONS ABOVE AND YOU ARE DETERMINED BY THE COURT TO BE INDIGENT, COUNSEL WILL BE APPOINTED TO REPRESENT YOU ON APPEAL IF YOU SO DESIRE AND IF THE APPEAL IS FROM A CIRCUIT COURT JUDGMENT OR SENTENCE, A COPY OF THE RECORD AND REPORTER'S TRANSCRIPT WILL BE PROVIDED AT NO COST TO YOU. IF YOU HAVE ANY QUESTIONS ABOUT YOUR RIGHTS OR THE CONSEQUENCES OF PLEADING GUILTY, PLEASE LET THE COURT KNOW NOW AND FURTHER EXPLANATION WILL BE MADE.

The court having personally addressed the defendant determines that the defendant has entered the plea voluntarily.

Date

Judge

ATTORNEY'S CERTIFICATE

I certify that the above was fully read to the defendant by me; that I explained the penalty or penalties involved with the defendant; that I discussed in detail defendant's rights and the consequences of pleading guilty; and that, in my judgment, the defendant understands the same and that he/she is knowingly, voluntarily, and intelligently waiving his/her rights and entering a voluntary and intelligent plea of guilty. I further certify to the court that I have in no way forced or induced the defendant to plead guilty and to my knowledge no one else has done so.

Date

Attorney

DEFENDANT'S STATEMENT OF WAIVER OF RIGHTS AND PLEA OF GUILTY

I certify to the court that my attorney has read and explained the matters set forth above; that my rights have been discussed with me in detail and fully explained; that I understand the charge or charges against me; that I understand my rights, the punishment or punishments provided by law as they may apply to my case, and I understand the consequences of pleading guilty; that I am not under the influence of any drugs, medicines, or alcoholic beverages; and I have not been threatened or abused or offered any inducement, reward, or hope of reward to plead guilty other than the terms of the plea agreement which will be stated on the record. I further state to the court that I am guilty of the charge to which I am entering a plea of guilty, that I desire to plead guilty, that I made up my own mind to plead guilty and that I knowingly and intelligently, and voluntarily waive my right to trial in this case. I further state that I am satisfied with my attorney's services and his/her handling of my case.

Date

Defendant

This crime is also subject to the following enhancements or additional penalties as provided by law if presumptive sentence or a departure sentence is imposed: (Provisions Checked Apply To Your Case)

☐ **Drug Demand Reduction Assessment Act and Loss of Driving Privileges:** Section 13A-12-281 provides that any person convicted of a violation of Sections 13A-12-202, 13A-12-203, 13A-12-204, 13A-12-211, 13A-12-212, 13A-12-213, 13A-12-215 or 13A-12-231, Ala. Code 1975, shall be assessed an additional penalty of \$1,000 if he or she is a first-time offender or \$2,000 if he or she is a repeat offender under one of these sections. Collection of all or part of the penalty will be suspended if, with court approval, the defendant enters a drug rehabilitation program and if the defendant agrees to pay for a part or all of the program costs. Upon successful completion of the program, the defendant may apply to the court to reduce the penalty by the amount actually paid by him or her for participation in the program. Any suspension of the penalty can be withdrawn by the court if the defendant fails to enroll in or successfully pursue or otherwise fail to complete an approved program. In addition, pursuant to Section 13A-12-214 (unlawful possession of marijuana in the second degree), Section 32-5A-191(a)(3) or Section 32-5A-191(a)(4) (DUI offenses involving drugs), the defendant will lose his or her privilege to drive a motor vehicle for a period of six months, which shall be in addition to any suspension or revocation otherwise provided by law.

☐ **Alcohol/Drug Related Offenses:** A person convicted of an alcohol or drug-related offense will be required to undergo an evaluation for substance abuse. Based upon the results of any such evaluation, he or she will be required to complete the recommended course of education and/or treatment and to pay for the evaluation and any program to which the defendant is referred. Failure to submit to an evaluation or failure to complete any program to which the defendant may be referred will be considered a violation of any probation or parole he or she may be granted. The defendant may also be required to attend monitoring sessions, including random drug and alcohol testing or blood, urine and/or breath tests and to pay a fee for this service. The defendant may request a waiver of part or all of the fees assessed if he or she is indigent or for any portion of time he or she is financially unable to pay. Community service may be ordered by the court in lieu of the monetary payment of fees by an indigent.

☐ **Drug Trafficking Offenses:** Convictions for drug trafficking while in possession of a firearm includes an additional mandatory period of incarceration of 5 years and a mandatory fine of \$25,000.

☐ **DUI Offenses:** Pursuant to 32-5A-191.4, Code of Alabama 1975, persons convicted of driving under the influence are subject to installation of ignition interlock devices on motor vehicles.

☐ **Drug Possession:** If any person is convicted in any court of this state for drug possession, drug sale, drug trafficking, or drug paraphernalia offenses as defined in Section 13A-12-211 to 13A-12-260, inclusive, Ala. Code 1975, an additional fee of \$100.00 will be assessed pursuant to Section 36-18-7, Ala. Code 1975.

Costs & Crime Victim's Assessment: You will also be ordered to pay the costs of court, which may include the fees of any appointed attorney, fines, fees, assessments, bail bond fee, and restitution if there is any. You will also be ordered to pay an additional monetary penalty for the use and benefit of the Alabama Crime Victims Compensation Commission of not less than \$50 and not more than \$10,000 for each felony and not less than \$25 and not more than \$1,000 for each misdemeanor for which you are convicted.

☐ **Other** _____

RIGHTS YOU HAVE AND WAIVER OF YOUR RIGHTS TRIAL

Under the Constitution of the United States and the Constitution and laws of the State of Alabama, you have a right to remain silent and you may not be compelled to give evidence against yourself. Your attorney cannot disclose any confidential talks he/she has had with you. You are not required to answer any questions. If you do answer questions knowing that you have a right to remain silent, you will have waived this right. You have the right to enter, and continue to assert, a plea of "Not Guilty" or "Not Guilty by Reason of Mental Disease or Defect," and have a public trial before a duly selected jury. The jury would decide your guilt or innocence based upon the evidence presented before them. If you elect to proceed to trial, you would have the right to be present, you would have the right to have your attorney present to assist you, you would have the right to confront and cross examine your accuser(s) and all the State's witnesses, you would have the right to subpoena witnesses to testify on your behalf and to have their attendance in court and their testimony required by the court, and you would have the right to take the witness stand and to testify, but only if you choose to do so, as no one can require you to do this. If you elect to testify, you can be cross examined by the State, just as any other witness is subjected to cross examination. If you decide not to testify, no one but your attorney will be allowed to comment about that fact to the jury. Your attorney is bound to do everything he/she can, honorably and reasonably, for you to obtain a fair and impartial trial. If you elect to proceed to trial, you come to court presumed to be innocent. This presumption of innocence will follow you throughout the trial until the State produces sufficient evidence to convince the jury (or the court if the trial is non-jury) of your guilt beyond a reasonable doubt. You have no burden of proof in this case. If the State fails to meet its burden, you would be found not guilty. If you are entering a guilty plea to a charge for which you have not yet been indicted, you are waiving indictment by a grand jury and you will be pleading guilty to a charge preferred against you by a District Attorney's Information filed with the court. If you are not a United States citizen, a guilty plea may subject you to adverse immigration consequences, including deportation (See 8 U.S.C. §1227), exclusion from reentry to the United States and amnesty, and that the appropriate consulate may be informed of the plea and conviction.

DEPARTURE SENTENCE (Check if applicable)

____ You have the right to notice seven days prior to trial of any aggravating factor the state intends to assert in your case and you have the right to a trial by jury as to the existence of that factor. The state bears the burden of proving sufficient evidence to convince the jury (or the court if the trial is non-jury) of the existence of that factor beyond a reasonable doubt. You have the right to assert mitigating factors for presentation to the sentencing trial judge by giving the sentencing judge notice of such factors no less than 7 days prior to sentencing. You bear the burden of proving by sufficient evidence to convince the court by a preponderance of the evidence that such factor exists.

WAIVER

If you plead guilty, (____ and admit the aggravating factors) there will be no trial. You will be waiving your rights outlined above, except your rights relating to representation by an attorney. The state will have nothing to prove and you will stand guilty on your guilty plea. By entering a plea of guilty, **YOU WILL ALSO WAIVE YOUR RIGHT TO APPEAL**, unless in appeals to the Court of Criminal Appeals or the Supreme Court (1) you have before entering the plea of guilty, expressly reserved the right to appeal with respect to a particular issue or issues, in which event appellate review shall be limited to a determination of the issue or issues reserved, (2) you have timely filed a motion to withdraw the plea of guilty after pronouncement of sentence on the ground that the withdrawal is necessary to correct a manifest injustice, and the court has denied your motion to withdraw your plea, or the motion has been deemed denied by operation of law.

IF YOU HAVE A RIGHT TO APPEAL UNDER ONE OF THE CONDITIONS ABOVE AND YOU ARE DETERMINED BY THE COURT TO BE INDIGENT, COUNSEL WILL BE APPOINTED TO REPRESENT YOU ON APPEAL IF YOU SO DESIRE AND IF THE APPEAL IS FROM A CIRCUIT COURT JUDGMENT OR SENTENCE, A COPY OF THE RECORD AND REPORTER'S TRANSCRIPT WILL BE PROVIDED AT NO COST TO YOU. IF YOU HAVE ANY QUESTIONS ABOUT YOUR RIGHTS OR THE CONSEQUENCES OF PLEADING GUILTY, PLEASE LET THE COURT KNOW NOW AND FURTHER EXPLANATION WILL BE MADE.

The court, having personally addressed the defendant, determines that the defendant has entered the plea voluntarily (.) _____ and has voluntarily admitted to the existence of the following aggravating factors.

Date

Judge

ATTORNEY'S CERTIFICATE

I certify that the above was fully read to the defendant by me; that I explained the penalty or penalties involved with the defendant; that I discussed in detail defendant's rights and the consequences of pleading guilty; and that, in my judgment, the defendant understands the same and that he/she is knowingly, voluntarily, and intelligently waiving his/her rights and entering a voluntary and intelligent plea of guilty. I further certify to the court that I have in no way forced or induced the defendant to plead guilty and to my knowledge no one else has done so.

Date

Attorney

DEFENDANT'S STATEMENT OF WAIVER OF RIGHTS AND PLEA OF GUILTY

I certify to the court that my attorney has read and explained the matters set forth above; that my rights have been discussed with me in detail and fully explained; that I understand the charge or charges against me; that I understand my rights, the punishment or punishments provided by law as they may apply to my case, and I understand the consequences of pleading guilty; that I am not under the influence of any drugs, medicines, or alcoholic beverages; and I have not been threatened or abused or offered any inducement, reward, or hope of reward to plead guilty other than the terms of the plea agreement which will be stated on the record. I further state to the court that I am guilty of the charge to which I am entering a plea of guilty, that I desire to plead guilty, that I made up my own mind to plead guilty and that I knowingly and intelligently, and voluntarily waive my right to trial in this case (____ and I admit the existence of the aggravating factors). I further state that I am satisfied with my attorney's services and his/her handling of my case.

Date

Defendant

PLEA OF NOT GUILT AND WAIVER OF ARRAINGNMENT
FOR NON CAPITAL OFFENSE

THE STATE OF ALABAMA)	IN THE CIRCUIT COURT OF
vs.)	JEFFERSON COUNTY, ALABAMA
_____)	CRIMINAL CASE NO. _____

COMES NOW the defendant in the above styled matter, and to the offense charged enters a plea of Not Guilty (and Not Guilty by Reason of Mental Disease or Defect).

Defendant further waives the right to have an Arraignment at which the defendant is present in person, or at which the defendant is represented by an attorney.

But the Defendant specifically and expressly reserves the right and with leave of Court hereby granted to defendant hereafter, but prior to the trial date, to interpose and special pleas or motions which he might legally have interposed prior to his said plea of Not Guilt.

I, _____, Defendant, hereby acknowledge receipt of a copy of the charges against me. I am not eligible to be considered as a youthful offender.

_____, _____

Age: _____ DOB: _____

Defendant

Attorney for Defendant

Filed In Open Court

This ____ date of ____ 20 ____
CIRCUIT JUDGE
TERESA T. PULLIAM

By _____
JUDICIAL ASSISTANT/BAILIFF

STATE OF ALABAMA

vs.

"COURT'S EXHIBIT B"

IN THE CIRCUIT COURT OF
THE
TENTH JUDICIAL CIRCUIT
OF ALABAMA

Case(s) No. _____

Defendant

DEFENDANT'S STATEMENT OF SATISFACTION OF
SERVICES REDNERED BY COURT APPOINTED ATTORNEY

TO THE ABOVE NAMED DEDENDANT:

1. Are you satisfied that your attorney, _____, Esq., is a competent, good attorney and has represented you to your best interest in the settlement of this case(s)? Yes _____ No _____
2. Are you satisfied with the plea bargaining in this case(s)? Yes _____ No _____
3. Did you plead guilty of your own free will? Yes _____ No _____
4. Has anyone forced you or coerced you in any manner to get you to plead guilty in this case(s)? Yes _____ No _____
5. Has anyone promised you anything to get you to plead guilty? Yes _____ No _____

If you answered "yes" to questions 1, 2 and 3 and "no" to questions 4 and 5, sign this form indicating your attorney has looked to your best interest and your concurrence with this Statement of Satisfaction.

Done this the _____ day of _____.

Defendant

Witness:

Circuit Judge

Jefferson County, Alabama

Theft Court Deferred Program Plea Agreement

STATE of ALABAMA,

Plaintiff, vs. _____ Case No. _____

Defendant

The State of Alabama, the Defendant, and the Defendant's Attorney make the following agreement, effective upon a plea of guilty in the Jefferson County Deferred Theft Court Program and acceptance of said plea by this court.

1. Defendant will enter a plea of guilty to the specified charge, _____
2. Defendant hereby waives his/her right to appeal this guilty plea for any reason.
3. Defendant agrees to comply with **ALL** of the rules and requirements of the program.
4. Defendant agrees to comply with **ALL** of the directives of the Court and the Theft Court Deferred Program.
5. Defendant agrees to remain alcohol and drug free.
6. Defendant agrees to submit to random drug and alcohol urinalysis.
7. Defendant agrees to pay a fee (to be determined at intake based on Track that he/she assessed at/ ranging from \$650.00-\$1500.00) to the UAB Substance Abuse program for the program administration and supervision of this program.
8. Defendant agrees to pay all court costs and restitution assessed in this case. **Defendant Agrees to Pay Restitution in the Amount of _____, Payable to _____.**
9. Defendant agrees to obey all local, state, and federal laws.
10. Defendant, Defendant's Attorney, and the District Attorney agree that if the Defendant successfully completes **ALL** of the requirements of the Jefferson County Deferred Theft Court program, then the plea will be set aside and the charge will be dismissed upon payment of all fees, court costs, and restitution assigned to his/hers case(s).
11. If the defendant fails to successfully complete the Jefferson County Deferred Theft Court Program, the court will enter a final adjudication of guilt on the Defendant's guilty plea and the Defendant will be sentenced accordingly by the court. **The Parties Hereto Agree that the Defendant Shall be Sentenced to a Term of _____ Months, and the Defendant Agrees that said sentence complies with the Sentencing Guidelines, if applicable.**

Filed in Open Court this _____ day of _____, 20____.

Next Court Review Date: _____

You have 24 hours to contact the Specialty Court Staff, to schedule a mandatory intake appointment.

UAB Community Justice Programs / Specialty Courts: Criminal Justice Center, 3rd Floor

205.325.5842 – Request to speak with the Program Manager or Theft Court Case Manager

Defendant

Defendant's Attorney

District Attorney

Judge

Jefferson County, Alabama
Theft Court Deferred Program Application

TODAY'S DATE: _____

CLIENT'S NAME: _____ DOB: _____

LAST

FIRST

MI

Alias(s): _____

SEX: _____ RACE: _____ SOCIAL SECURITY NUMBER: _____

ADDRESS: _____

PRIMARY CONTACT #: _____ 2nd CONTACT #: _____

ATTORNEY: _____ Attorney #: _____

CHARGE: _____ CASE #: _____

CHARGE: _____ CASE #: _____

DRUG or ALCOHOL USE? ☐ YES ☐ NO

IF YES, PLEASE LIST ALL DRUGS USED : _____

VETERAN: ☐ YES ☐ NO ARE YOU CURRENTLY HOMELESS? ☐ YES ☐ NO

HAVE YOU EVER BEEN DIAGNOSED WITH A MENTAL HEALTH DISORDER? ☐ YES ☐ NO

IF YES, WHAT DIAGNOSIS? _____

LIST ANY MEDICATIONS PRESCRIBED: _____

CURRENTLY IN SCHOOL? ☐ YES ☐ NO IF YES, WHERE? _____

HIGHEST GRADE COMPLETED? _____ GED? ☐ YES ☐ NO

CURRENTLY EMPLOYED? ☐ YES ☐ NO IF YES, WHERE? _____

EMPLOYED ☐ FT ☐ PT ☐ TEMP ☐ DISABLED

PRIOR FELONY CHARGE (S): _____ NUMBER OF FELONY CONVICTIONS _____

CURRENTLY ON PROBATION/PAROLE? ☐ YES ☐ NO IF YES, WHERE? _____

BY MY SIGNATURE I HERETO, CERTIFY THAT THE INFORMATION PROVIDED IN THIS APPLICATION IS TRUE AND ACCURATE

DATE: _____

DEFENDANT'S SIGNATURE

DATE: _____

DEFENDANT'S ATTORNEY SIGNATURE

Jefferson County, Alabama
Theft Court Deferred Program
Instructions for Application

All applications originating after 5/1/19 must be handled in the District Court

1. Defense Attorney must contact the Deputy District Attorney, in the District Attorney's Office that's assigned to your case, for preliminary file review and analysis of Defendant's eligibility for the Theft Court Deferred Program. If Defendant appears to be eligible, Defense Attorney will be notified.
2. Defense Attorney must review application form with the defendant, verifying that the defendant meets the criterion and that the Defendant understands the requirements of the Theft Court Deferred program.
3. Defense Attorney secures Defendant's signature to the Theft Court Application.

Defense Attorney returns completed application, along with this instruction sheet, to the appropriate District Court.

4. The District Court will file the original application with the Clerk's Office, and will furnish one stamped, filed copy each to UAB Community Justice Programs -TASC, Defense Attorney, and District Attorney's Office.

By my signature hereto, certify that I have completed steps 1-4.

Defense Attorney's Signature

Date

Defense Attorney's Name (Printed)

Jefferson County, Alabama

Theft Court Deferred Program

Eligibility Requirements

- ☐ Defendant must be charged with a property crime that has a direct correlation to substance abuse or alcohol abuse (**All robbery charges, other crimes involving violence or threats of violence and burglary I and II charges are excluded**).
- ☐ Defendant's with prior charges are reviewed on a case by case basis- District Attorney's discretion
- ☐ Current charge must be a felony.
- ☐ Victim consultation is necessary, prior to admittance to the program.

The Jefferson County Theft Court Program Is A Privilege, Not a Right. The District Attorney's Office has Absolute Discretion Over Whether Or Not Your Application Will Be Granted.

- ☐ If your application is granted, you will be required to enter a guilty plea in your case and waive any rights to an appeal of your guilty plea before you enter into the deferred program. The District/Circuit Judge will accept your plea, but will withhold sentencing pending your successful completion of the Theft Court Deferred Program.
- ☐ The Theft Court Deferred program requires that you complete an intake assessment immediately upon admission to the program. Failure to schedule intake assessment appointment within 7 days of your admission will result in a final adjudication of guilt in your case.
- ☐ In order to successfully complete the Theft Court Deferred Program you must pay all program fees, court costs, and restitution, comply with all drug/alcohol testing and treatment referrals made.
- ☐ The Theft Court Deferred Program is **NOT** an indefinite program. Length of program varies dependent on risk level but ranges from 3 months to 12 months.
- ☐ Once all obligations and requirements of the Theft Court Deferred Program have been met, you will have completed the Program and your guilty plea will be set aside and the case will be dismissed upon payment of all costs, fees and restitution. If you do not successfully complete the program, you will be returned to the court for final adjudication and sentencing.
- ☐ ***If program requirements for completion have been met but there is still an outstanding balance of costs/restitution, your case will be moved to the administrative docket for a period of time to be determined by the District Attorney's office in order for the fees to be paid in full. After such time, if there is still an outstanding balance, a final adjudication of guilty in your case will be rendered.**
- ☐ **No refunds will be given on any fees paid if Program is not completed.**
- ☐ **All applications originating after 5/1/19 must be handled in the District Court.**

DEFENSE ATTORNEY INSTRUCTIONS

STEP 1: Submit the following documents to the Forensic Outpatient Program

1. Defense Attorney Information Form (attached): this is a fillable form. Signature fields are not fillable and will need to be signed by the defense counsel.
2. Original completed Authorization to Release/Receive Protected Health Information Forms (Release Form attached) must be correctly completed and signed by the Defendant for known previous treating entities. ***These forms must be witnessed.* Please do not put client's name on the Release of Information where the previous treating entity's name should go. Please do not send blank releases that only have the client's signature to the Forensic Outpatient Program.**

NOTE: If the Defendant is not capable of giving consent, please submit an order for Production of Records to the Circuit Judge and submit the order to the previous treating entity. ***Previous treating entities must be listed***

NOTE: If limited intellectual functioning is an issue, complete release form for school records.

STEP 2: Send Defense Attorney Information form and a copy and/or copies of the release form(s) to:
DMH Forensic Outpatient Program Email at fop.dmh@mh.alabama.gov
(DO NOT SEND TO INDIVIDUAL EMAIL ADDRESSES) or

Mail to:

Alethea Pittman, JD, MPA
Administrator VI - Forensic Outpatient Services
Alabama Department of Mental Health
Mental Illness & Substance Abuse Services Division
100 North Union Street, Suite 420
Montgomery, AL 36130-1410
fop.dmh@mh.alabama.gov
Phone: 334-242-3732

STEP 3: **Send original release form(s) and signed court orders to the previous treating entity(ies).**
PLEASE ENSURE THERE IS A WITNESS TO THE CLIENT'S SIGNATURE ON THE RELEASE FORM.

**PLEASE ENSURE TO LEGIBLY WRITE/TYPE YOUR CLIENT'S NAME, DOB, AND SSN
AT THE TOP OF THE FORM IN THE SECTION INDICATED.**

STEP 3 IS THE RESPONSIBILITY OF THE DEFENSE ATTORNEY

COVER SHEET

DEFENDANT'S NAME _____

DEFENDANT'S CURRENT LOCATION: _____ JAIL _____ ON BOND

RACE: _____ SEX: _____ DOB: _____

SOCIAL SECURITY NO. : _____

CONFIRMATION OF CASE NUMBER(S)/CHARGE(S) BY COURT FILE:

CASE NO: _____ CHARGE: _____

CASE NO: _____ CHARGE: _____

CASE NO: _____ CHARGE: _____

JUDGE _____

DISTRICT ATTORNEY: _____

ADDRESS: _____

CITY/STATE/ZIP: _____

TELEPHONE: _____

DEFENSE ATTORNEY: _____

ADDRESS: _____

CITY /ST A TE/ZIP: _____

TELEPHONE: _____

NEXT COURT DATE: _____

Forward Cover Sheet with the following documents to our:

DMH Forensic Outpatient Program Email at fop.dmh@mh.alabama.gov.

Mail to:

Or

Alethea Pittman, JD, MPA
Administrator VI - Forensic Outpatient Services
Alabama Department of Mental Health
Mental Illness & Substance Abuse Services Division
100 North Union Street, Suite 420
Montgomery, AL 36130-1410
fop.dmh@mh.alabama.gov
Phone: 334-242-3732



Alabama Department of Mental Health
Forensic Outpatient Program
RSA Union Building
100 North Union Street, Suite #420
Post Office Box 301410
Montgomery, AL 36130-1410
PHONE: 334-242-3732 FAX: 334-242-3025

DEFENDANT NAME: _____

RACE/SEX _____ DOB: _____

SOCIAL SECURITY NO.: _____

Defense Attorney Information

Side 1

Pending Charge(s)/Case Number(s): _____

Extent of contact with defendant/date of last contact: _____

Observations/Information regarding the need for clinical evaluation, including specific difficulties in communicating with the defendant: _____

Circumstances surrounding the alleged offense that led you to believe the defendant's mental state is an issue: _____

Previous convictions/pertinent background information _____

Previous psychiatric treatment (PLEASE HAVE DEFENDANT SIGN AUTHORIZATION TO RELEASE/RECEIVE PROTECTED HEALTH INFORMATION FORM FOR EACH TREATING AGENCY AND FORWARD ORIGINAL TO THE AGENCY AND A LEGIBLE XEROX COPY TO THE FORENSIC OUTPATIENT PROGRAM); _____

DEFENSE ATTORNEY INFORMATION

SIDE 2

NEXT OF KIN: Name _____ Relationship _____

Complete Address: _____

Telephone Number: _____

Information from relatives, friends, etc., that would clarify defendant's mental condition: _____

Defendant's current location: _____

Date: _____

Attorney: _____

Address: _____

Telephone: _____

Please return this form and copies of Authorization to Release/Receive Protected Health Information form along with
pertinent reports/records you may have to:

DMH Forensic Outpatient Program Email at fop.dmh@mh.alabama.gov.

Mail to:

Or

Alethea Pittman, JD, MPA
Administrator VI - Forensic Outpatient Services
Alabama Department of Mental Health
Mental Illness & Substance Abuse Services Division
100 North Union Street, Suite 420
Montgomery, AL 36130-1410
fop.dmh@mh.alabama.gov
Phone: 334-242-3732



Alabama Department of Mental Health
Forensic Outpatient Program
RSA Union Building
100 North Union Street, Suite #420
Post Office Box 301410
Montgomery, Alabama 36130-1410
Phone: 334-242-3732 Fax: 334-242-3025

Patient's Name: _____
Date of Birth: _____
Social Security #: _____
ADMH Record #: _____

AUTHORIZATION TO RELEASE/RECEIVE PROTECTED HEALTH INFORMATION

I authorize ADMH Forensic Outpatient Program to: Release to ☐ Receive from ☒

Previous Treating Facility: _____

Address: _____

City: _____ State: _____ Zip: _____

copies of my health information for the treatment period _____ to _____
(date) (date)

I specifically authorize the release of the following information: _____

Purpose for disclosure: _____

I understand that information contained in the documents to be released may include, but is not limited to, drug and alcohol use, abuse or dependency or related conditions, sexually transmitted disease or sexual orientation, behavioral or mental health conditions, Immunodeficiency Syndrome (AIDS) diagnosis and AIDS related conditions.

I further understand my authorizing the disclosure/obtaining of my health information is voluntary. I understand I need not sign this form in order to receive treatment. I understand I may inspect information to be used or disclosed as provided by law. I understand that when the information is disclosed by the ADMH Forensic Outpatient Program pursuant to this authorization, it has no control over the recipient re-disclosing this information.

I understand I have the right to revoke this authorization at any time. I understand that to revoke this authorization, I must provide a specific request to revoke the authorization in writing to the Forensic Outpatient Program at the Alabama Department of Mental Health. I may revoke this authorization except to the extent that action has been taken in reliance on the authorization or this authorization was obtained as a condition of obtaining insurance and law provides the insurer the right to contest a claim under the plan. If this authorization is not expressly revoked, it will automatically expire six (6) months from the date of my signature below.

I acknowledge that I have read and fully understand this authorization as it applies to me. My signature authorizes execution of the terms of this document. A copy or facsimile of this authorization will be considered as valid as the original.

Signature of Patient/Legal Representative _____ Date _____ Time _____

If signed by a legal representative, a description of the representative's authority to act is as follows:

Witness _____ Date _____ Time _____

NOTE TO PARTY RECEIVING INFORMATION: This information has been disclosed to you from records whose confidentiality is protected by federal law, which prohibits you from making any further disclosure of information without the specific written consent of the person to whom it pertains, or as otherwise permitted, by such regulations. A general authorization for the release of medical or other information is not sufficient for this purpose (Federal Regulation 42 CFR, Part 2).

IN THE CIRCUIT COURT OF _____ COUNTY, ALABAMA

STATE OF ALABAMA

v.

DEFENDANT.

)
)
) CASE NO. _____
)
)
)

ORDER FOR PRODUCTION OF RECORDS

I, the undersigned Circuit Judge, do hereby certify that, it having been alleged to me that certain records of the above-named Defendant (DOB _____, SSN: _____) are in the custody of the agencies noted below, that the records are subject to the confidentiality provisions of 38 United States Code Section 7332 and 42 C.F.R. Sections 2.1 59 2.67-1, and that production of the records is necessary to the completion of the psychiatric evaluation and treatment ordered by this Court,

THEREFORE, after weighing the public interest and the need for disclosure against the injury to the patient, to the physician-patient relationship and to the treatment services,

CONSIDER, ORDER, ADJUDGE AND DECREE that good cause exists for production and disclosure of the records, *at no cost to the defendant, defense counsel and/or the Alabama Department of Mental Health*, that other competent evidence or sources of information regarding the patient's condition are not reasonably available, that there is no successful treatment or rehabilitation of other patients, and that the following limitations on disclosure shall be imposed:

- 1) Disclosure is limited to the following described parts of the patient's records:
Hospitalization/Treatment Summaries, Mental Status Examinations, Physical Examinations, Psychological Testing Reports, Social History Studies, Lab & X-Ray Reports, Other (specify):

- 2) Disclosure is limited to the following agency whose need for information in order to execute a court order for outpatient mental evaluation is the basis of this order:
Alabama Department of Mental Health, Forensic Outpatient Program;
- 3) A copy of this Order shall be forwarded by the Clerk to the agencies listed below, which shall release the identified records to the attention of Alabama Department of Mental Health, Forensic Outpatient Program, 100 North Union Street, Montgomery, Alabama 36130-1410, upon the receipt of this Court Order.

ORDERED this _____ day of _____, 2018.

Circuit Court Judge

Distribute to:

Alabama Department of Mental Health
Forensic Outpatient Program
100 North Union Street
Post Office Box 301410
Montgomery, Alabama 36130-1410
Email: fop.dmh@mh.alabama.gov
Fax: 1 (334) 242-3025

**ATTORNEY TO LIST PREVIOUS TREATING ENTITY(IES)
AND/OR FACILITY IF DEFENANT IS IN CUSTODY:**

CLERK TO DISTRIBUTE



KAY IVEY
GOVERNOR

STATE OF ALABAMA
DEPARTMENT OF MENTAL HEALTH
RSA UNION BUILDING
100 NORTH UNION STREET
POST OFFICE BOX 301410
MONTGOMERY, ALABAMA 36130-1410
WWW.MH.ALABAMA.GOV



LYNN T. BESHEAR
COMMISSIONER

Date

The Honorable _____
District Attorney - _____ Judicial Circuit
_____ County Courthouse
P.O. Box _____
_____, AL _____

Defendant:
Case Number:

Dear Mr. _____:

A Circuit Court order has been received on the above-named defendant for evaluation by a Certified Forensic Examiner of the Alabama Department of Mental Health. In conducting this evaluation, it is important that the examiner have accurate and detailed information about the pending charges, including specific information about the events leading to the arrest, crime scenario, victim/witness statements, and statements made by the defendant.

Therefore, the following information is being requested from the case's discovery file: the Alabama Uniform Offense and Arrest Report, investigative reports, written statements of victims/witnesses/defendant/co-defendants, an arrest record, the Miranda warning, and any other information that might assist us with the evaluation. We cannot proceed with the scheduling of this evaluation until the information is received. These documents, along with information received from defense counsel, family members and the defendant will be taken into consideration by the Certified Forensic Examiner.

We greatly appreciate your time and cooperation in preparing this information. *It is requested that your office return the requested information within ten (10) business days so that we may respond to the order of the Court in as timely a manner as possible.* As it is critical for a thorough assessment, this information will be needed prior to conducting this evaluation.

Upon completion of the evaluation, the information you have provided will be maintained in a secure file to be used as needed for any future treatment or evaluation services. Should you wish this information to be handled in another manner, please advise.

Should you have any questions, please do not hesitate to contact me.

Respectfully,

AP

Alethea Pittman, JD, MPA

Administrator VI-Risk Manager

Email: fop.dmh@.mh.alabama.gov (preferred)

Fax: 1 (334) 242-3025

DISTRICT ATTORNEY CASE DISCOVERY FILE INFORMATION

Review the information requested below and forward to the Forensic Outpatient Program within (10) business days from the date of correspondence at:

fop.dmh@mh.alabama.gov

- I. Alabama Uniform Offense and Arrest Report
- II. Investigative Reports
- III. Written Statements
 - Victims
 - Witnesses
 - Defendant
 - Co-Defendants
- IV. Defendant's Arrest Record
- V. Miranda Warning (audio/video recording if available)
- VI. Accurate and detailed information about the following:
 - Pending Charges
 - Specific information about the events leading to arrest
 - Crime Scenario
- VII. Other information that would potentially assist with the evaluation

Should you have any questions, please contact Alethea Pittman, Administrator VI-Forensic Outpatient Services, at (334) 242-3732 (office) and/or fop.dmh@mh.alabama.gov. You may also contact Tangela Jeffers, ASA III, at (334) 242-3208 and/or tangela.jeffers@mh.alabama.gov.



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LYNN T. BESHEAR
COMMISSIONER

Forensic Outpatient Program

April 26, 2018

Your Honor:

Beginning May 1, 2018, Alabama Department of Mental Health (ADMH) outpatient forensic services will be located at the ADMH Central Office in Montgomery, Alabama. All orders for *outpatient forensic evaluations* will be processed through the Central Office. Orders directing ADMH to provide any defendant an outpatient forensic evaluation should be sent by email to fop.dmh@mh.alabama.gov. All written correspondence involving *outpatient forensic evaluations* should be addressed to Alabama Department of Mental Health Forensic Outpatient Program and mailed to 100 North Union Street Post Office Box 301410 Montgomery, AL 36130-1410. Contact may be reached by telephone to confirm receipt of any order at (334) 242-3732 and/or (334) 242-3208.

Orders for *inpatient forensic evaluations* should continue to be forwarded to Taylor Hardin Secure Medical Facility in Tuscaloosa, Alabama at 1301 Jack Warner Parkway Tuscaloosa, AL 35404. Information regarding *inpatient orders* may be obtained by contacting Tierra Palmer, Admission Coordinator and Court Liaison, at Taylor Hardin Secure Medical Facility at (205) 462-4513.

Please contact Alethea Pittman at (334) 242-3732 or alethea.pittman@mh.alabama.gov, if you have any questions concerning the transmission of orders for outpatient mental evaluations.

Respectfully,

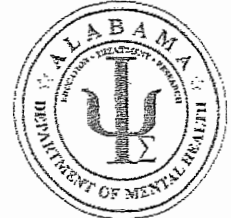
Alethea Pittman, JD, MPA
Administrator VI – Risk Manager

CC: Lynn T. Beshear, Commissioner
Diane Baugher, Associate Commissioner MHSAS
Thomas B. Klinner, General Counsel
Annie Jackson, Director – Taylor Hardin Secure Medical Facility



KAY IVEY
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STATE OF ALABAMA
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LYNN T. BESHEAR
COMMISSIONER

MEMORANDUM

Alabama Department of Mental Health Forensic Outpatient Program

To: All Alabama Circuit Judges
All Alabama Circuit Clerks
All Alabama District Attorneys
All Alabama Defense Bar Members

From: Alethea Pittman, JD, MPA
Administrator VI – Director, Outpatient Forensic Services

CC: Lynn T. Beshear, Commissioner
Diane Baugher, Associate Commissioner MHSAS
Thomas B. Klinner, General Counsel
Annie Jackson, Director – Taylor Hardin Secure Medical Facility

Date: June 12, 2018

Re: Reminder – Updated Contact Information

Beginning May 1, 2018, Alabama Department of Mental Health (ADMH) outpatient forensic services was relocated to the ADMH Central Office in Montgomery, Alabama. All orders for *outpatient forensic evaluations* are processed through the Central Office. Orders directing ADMH to provide any defendant an outpatient forensic evaluation and electronic responses to requests for information should be sent by email to fop.dmh@mh.alabama.gov. All written correspondence involving *outpatient forensic evaluations* and responses to requests for information should be addressed to **Alabama Department of Mental Health Forensic Outpatient Program and mailed to 100 North Union Street Post Office Box 301410 Montgomery, AL 36130-1410**. Contact may be reached by telephone to confirm receipt of any order at (334) 242-3208.

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Please contact Alethea Pittman at (334) 242-3732 or alethea.pittman@mh.alabama.gov. if you have any questions concerning the transmission of orders for outpatient mental evaluations.