

COURT FILE NUMBER: _____

REQUEST TO BE CONSIDERED FOR DIVERSION

STATE OF MINNESOTA,

Plaintiff,

vs.

_____ ,

Defendant.

I, _____, Defendant in the above-entitled action, respectfully represent and state as follows:

1. My full name is _____ I am ____ years old. My date of birth is _____.
2. I have received, read and fully understand the provisions of this request and the Diversion Program Agreement form.
3. If accepted into the Olmsted County Adult Diversion Program, I agree to be bound by all provisions of the Olmsted County Adult Diversion Program.
4. If accepted into the Olmsted County Adult Diversion Program, I understand I am waiving any rights I have to a speedy trial or Omnibus Hearing.
5. I understand that I have been charged with the crime(s) of _____, committed on or about _____ in Olmsted County, Minnesota.
6. I understand that in order to be accepted into this program, I must fully disclose and admit the facts underlying the charges including, but not limited to, the identity and involvement of others. I understand that the prosecutor will have complete discretion in determining whether my disclosures and admissions are complete and truthful.
7. I understand that I may be required to cooperate in the ongoing investigation of this matter and may be required to testify against others involved in this matter.

8. I understand and agree that any and all statements I make in this request are voluntarily given and may be used against me in any subsequent legal proceedings.
9. I agree to be bound by all terms and conditions placed upon me by the Diversion Coordinator.
10. I understand that if I fail to meet the terms of the diversion program, prosecution will resume, and I will face the possibility of conviction and sentencing.
11. I understand that if I voluntarily discontinue participation in the program prior to successful completion of all terms and conditions, prosecution will resume, and I will face the possibility of conviction and sentencing.
12. In view of all facts and considerations, and with a full understanding of the provisions of this document and the Olmsted County Adult Diversion Program, I am hereby requesting admission into this program.

Defendant

I, _____, state that I am the attorney for the defendant in the above-entitled criminal action; that I personally explained the contents of the above petition to the defendant; and that I personally observed the defendant date and sign the above petition.

Dated this ____ day of _____, 20____.

Attorney for Defendant

OLMSTED COUNTY ADULT PRE-TRIAL DIVERSION PROGRAM AGREEMENT FORM

I. BACKGROUND INFORMATION:

Last Name	First	MI	Soc. Sec. #
			Sex: M__ F__
Current Address			
City	State	Zip	Date of Birth
Phone Number (____) ____ - ____		Email: _____	
Are you currently Employed? ☐ Yes ☐ No			
Place of Employment			Occupation
Employment Address			
City	State	Zip	(____) ____ - ____ Employment Phone
Marital Status: ☐ Married ☐ Single ☐ Divorced ☐			
Spousal information:			
Last Name	First	MI	
Current Address			
City	State	Zip	Date of Birth
Phone Number (____) ____ - ____			

II. POLICY STATEMENT

The decision to offer pretrial diversion as an alternative disposition to criminal prosecution is a matter of prosecutorial discretion. Therefore, the Olmsted County adult pretrial diversion program is not intended to create any legal rights. Revisions to this program may be made at any time by the Olmsted County Attorney's Office without notice to any party, person, agency, corporation, or governmental unit or subdivision.

The Olmsted County Attorney's Office will administer this policy in a non-discriminatory manner. Therefore, the decision whether to offer or to accept pretrial diversion as an alternative disposition will not be based upon race, color, creed, religion, national origin, sex, sexual orientation, gender identity, citizenship, disability, status with regard to public assistance, familial status, or other constitutionally impermissible considerations.

The decision to offer pretrial diversion will be based upon a review of the investigative reports relating to the offense; the defendant's criminal and court history; and any other relevant information.

An offer of pretrial diversion will be made after consideration of the opinion of the victim. However, it remains within the discretion of the Olmsted County Attorney's Office to determine whether prosecution is appropriate.

The primary investigating agency also has a right to make its views known regarding pretrial diversion. Investigating officers will be encouraged to identify and make recommendations regarding defendants they deem appropriate for pretrial diversion.

III. PARTIES

The principal parties to this agreement are the defendant hereinabove mentioned, the defendant's attorney (if one exists), Olmsted County Community Corrections, and the Olmsted County Attorney's Office.

IV. PROCEDURE

To accept the terms of the pretrial diversion program, the above-named defendant must agree to each condition as outlined in this Agreement below. The agreement will be for up to 24 months.

V. TERMS OF THE PROGRAM

(THIS SECTION TO BE COMPLETED BY DIVERSION PROGRAM OFFICER.)

The defendant hereinabove named is hereby charged with the following offense(s):

The defendant by signing this Agreement herein below agrees to the conditions of this pretrial diversion program.

This Agreement will extend until _____, during which the defendant agrees to the following:

☐ Pay restitution in the amount of \$_____.

☐ Perform _____ hours of community service.

☐ Undergo Chemical Dependency Assessment and follow recommendations for treatment.

☐ Complete a Level of Service/Case Management Inventory (LS/CMI).

☐ Meet with Community Corrections at such times as they direct.

☐ Obtain a GED.

☐ Be subject to random alcohol and drug testing and random searches.

☐ Remain law abiding and of good behavior.

☐ Other _____

VI. CONDITIONS

The defendant understands and acknowledges the following conditions:

- (1) I hereby agree to sign an affidavit truthfully admitting to the facts of this case, and I waive any objection to the admissibility of this affidavit at trial in the event that I violate the conditions of the pretrial diversion program. I further understand that the prosecutor shall have complete discretion whether to accept this affidavit prior to entering the diversion program.

- (2) I hereby waive my right to a speedy trial and any similar defense based upon the delay brought about by my participation in the pretrial diversion program.
- (3) I hereby agree to make restitution to the victim(s) of the crime, if any, and such payments must be made in full prior to being discharged from the pretrial diversion program. Such restitution will be paid in the amount of \$_____ at a rate of \$_____ per _____ beginning on _____.
- (4) I hereby agree to remain law-abiding during the entire period of the pretrial diversion program, which includes no arrests, citations, or charges brought for a criminal or petty misdemeanor offense committed during the period of the pretrial diversion program. Any arrests, citations, or charges for offenses committed prior to entering the pretrial diversion program will also result in my disqualification from the program unless I provided complete and truthful information regarding the prior offenses before entering the program.
- (5) I hereby agree not to engage in specified activities, conduct, or associations, as separately determined by the diversion worker, during the entire period of the pretrial diversion program.
- (6) I hereby agree to provide complete and truthful information about and to testify against co-defendants or confederates to the offense being diverted.
- (7) I hereby agree to attend and successfully complete a rehabilitation program, including chemical dependency, psychological, or other treatment, counseling, training, or education, if recommended, and to pay for the costs of the program(s).
- (8) I hereby agree to perform community service.
- (9) I hereby agree to no contact with the victim(s) of or witness(es) to the crime for the duration of the pretrial diversion program, if requested by the victim(s) or witness(es).
- (10) I hereby attest that I have provided complete and truthful information regarding past criminal record, juvenile record, residences, education, psychological or medical treatment, finances, etc., in order to ensure I am eligible for participation in the program, and I hereby agree to sign releases for any of this information if I am requested to do so.
- (11) I agree to contact the diversion worker with any change in address, telephone number, or contact with law enforcement.

VII. TERMINATION AND COMPLETION

If the defendant materially violates any of the conditions of the pretrial diversion agreement or provides false or misleading information, the defendant may be terminated from the diversion program, and the State will ask the Court for a hearing to resume prosecution.

If the defendant successfully completes pretrial diversion, the diversion coordinator will inform the parties. The prosecutor will then file a dismissal with the Court pursuant to Rule 30.01.

VIII. EFFECTIVE DATE

This Agreement shall become effective as of the date it is signed by the individual parties herein below provided and shall continue in force until terminated or completed as hereinabove provided.

Defendant
Signed on the ____ day of_____, _____.

Defendant's Attorney
Signed on the ____ day of_____, _____.

Community Corrections
Signed on the ____ day of_____, _____.

Olmsted County Attorney's Office
Signed on the ____ day of_____, _____.