

(do not need to fill out question 16 for speeding diversions)

12. Employment (list current and previous employers and dates with each):

13. List the name and address of your immediate family: _____

14. List your medical history including any mental health treatment or counseling: _____

15. List any alcohol/drug treatment programs and dates of attendance: _____

16. List general information of your present financial status. Please attach pay stubs for the last month.

a. Employer: _____

b. Length of employment: _____

c. Previous employer: _____

d. Net and Gross Pay: _____

e. Paid period: _____

f. Monthly payments owed: _____

g. Total indebtedness: _____

17. List any incidence where you were arrested, charged or convicted of crimes whether felony, misdemeanor or traffic. List the city and state of the incident and result of the incident: _____

18. DO NOT SEND PAYMENT NOW. If you are accepted we will send you a diversion agreement with instruction on payment method.

, Defendant