



# CHEROKEE COUNTY ATTORNEY'S OFFICE

Jacob A. Conard, County Attorney

Nathan R. Coleman, Deputy County Attorney

Cherokee County Courthouse – 110 W. Maple St., Rm 212 – Columbus, Kansas 66725

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## **APPLICATION FOR PRETRIAL DIVERSION—JUVENILE OFFENDER**

To be considered for participation in the Pretrial Diversion Program, the following application must be completed in its entirety, and submitted to the Cherokee County Attorney's Office not more than 30 days after the date of arraignment (misdemeanors) or first appearance (felonies). Your application must be accompanied by a nonrefundable application fee of \$25, in the form of a cashier's check, money order, or firm check, made payable the Cherokee County Attorney Diversion Fee Fund. If Pretrial Diversion is granted, a signed Diversion Agreement must be filed not less than 14 days prior to trial (misdemeanors) or preliminary hearing (felonies). The applicant is responsible for continuing such trial or hearing as may be necessary.

Full name: \_\_\_\_\_

Full name at time of offense, if different: \_\_\_\_\_

Other name(s) by which you have been known: \_\_\_\_\_

Sex: \_\_\_\_\_ Race: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Street Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Employer/School: \_\_\_\_\_

Phone: Home \_\_\_\_\_ Work \_\_\_\_\_ Cell \_\_\_\_\_

List all criminal allegations within the last five years, whether convicted or not: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

List all felony or misdemeanor convictions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Briefly state the facts which led to this case, and any facts you believe mitigate your actions: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Explain why you believe you should be granted a diversion: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Additional comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

I hereby apply to participate in the Pretrial Diversion Program. I certify the facts provided in the application are true and correct to the best of my knowledge. I waive my right to a speedy trial and ask the trial of my case be continued at my request so I can complete the program.

\_\_\_\_\_  
Signature

Date: \_\_\_\_\_

Applications submitted by mail must be sent to:

Cherokee County Attorney's Office  
P.O. Box 78  
Columbus, KS 66725