



DIVERSION
REFERRAL FORM

To: Community Corrections Program

Date: _____

Referred by: _____
Address: _____

Phone: _____

Offender Information:

Name: _____

Case No. _____

Address: _____

Current charge(s): _____

Phone: _____

SSN: _____

Attorney: _____

DOB: _____

Bond: _____

Judge: _____

Next Court Date: _____

Prosecutor: _____

Pending Charges:

Multiple horizontal lines for listing pending charges.

Comments:

Multiple horizontal lines for providing comments.