



Prince George's County Circuit Court
Adult Drug Court Program

Attorney Referral Form

Defendant's Name: Case#:

Instant Offense: Instant Arrest Date: Judge:

DOB: SS#: Sex: Race: Marital Status:

Defendant's Address:

Phone No.: Alternate Phone No.:

State's Attorney Assigned to the Case:

Yes No Is the applicant a U.S. citizen or legal resident?

Yes No Is the applicant's PERMANENT address in Prince George's County?

Yes No Is the applicant eighteen (18) years of age or older?

Yes No Is there any indication of recent or past substance abuse? (arrest's, assessments, treatment, self-report, etc.)

INELIBIGLBE CRIMES

(Prior Convictions, Current Charge, Any Attempt, Conspiracy to Commit, or Accessory Before or After the Fact)

Table with 2 columns listing crimes: Abduction, Arson in the first degree, Carjacking, Burglary in the first degree (Intent to commit crime of violence), Domestic Violence (within the past 5 years), Escape in the first degree, Firearm Offense, Kidnapping, Voluntary or Involuntary Manslaughter, Maiming, Mayhem, Murder in the first or second degree, Rape in the first or second degree, Robbery, Robbery with a deadly weapon, Sexual offense in the first, second, or third degree.

Yes No Is the current charge an INELIGIBLE crime?

Yes No Is the referred case a violation of probation?

Yes No Are there any other or concurrent parole or probation cases (regardless of jurisdiction)?

Yes No Is the applicant currently in jail? (If Yes, since )

Yes No Was a firearm possessed or used in the present offense?

Yes No Has the applicant ever been enrolled in HIDTA? If yes, did applicant successfully complete HIDTA Program? Yes No If No, Why?

Yes No Are there any other pending charges, violation of probation, sentencing, warrants, or detainers (regardless of jurisdictions)?

Yes No What are the sentencing guidelines

Yes No Has a drug court plea been accepted & scheduled for Drug Court sentencing?

Plea Judge: Plea Date: Drug Court Sent. Date:

(It is not necessary to plea prior to referring to Drug Court. If a plea is heard before a Judge other than the Drug Court Judge you must complete this referral and obtain a drug court sentencing date from the Assignment Office)

Person Completing Form (Please print) Phone Number Fax Number Date

PLEASE FAX THIS REFERRAL TO: Christina Buck, Program Coordinator, at: 301-952-4550 Office#: 301-952-3606