



EUDORA MUNICIPAL COURT DRUG & DRUG PARAPHERNALIA DIVERSION PROGRAM

The Eudora City Prosecutor's Office has adopted the following policies for its Drug and Drug Paraphernalia diversion program in the Eudora Municipal Court. The policies contained herein are effective for those Drug and Drug Paraphernalia offenses committed after July 1, 2011.

Diversion is an agreement between you and the City Prosecutor whereby you agree to abide by certain terms and the City Prosecutor agrees to dismiss the subject charge(s) upon your successful completion of the diversion. If you do not successfully complete the diversion, the City Prosecutor will seek the revocation of your diversion agreement and proceed with the prosecution of your charge(s). In that case, any payments made or community service performed under the diversion agreement will be forfeited. In short, diversion affords you an opportunity to avoid a conviction on your charge(s).

Diversion is a privilege. You do not have a right to obtain a diversion. The City Prosecutor has the discretion to grant or deny diversions and may deny a diversion even if the charge is a first offense. Be advised that the City Prosecutor will deny a diversion if you have previously participated in a diversion program for a Drug or Drug Paraphernalia offense or if you have been previously convicted of or pled *nolo contendere* (no contest) to a Drug or Drug Paraphernalia offense in the State of Kansas, another state, or any political subdivision thereof. In addition to those considerations, the following factors will also be taken into account when determining whether to grant or deny a diversion:

- The nature of the crime charged
- Any special characteristics or circumstances of the defendant
- Whether the defendant is a first-time offender and if the defendant has previously participated in a diversion program
- Whether there is a probability the defendant will cooperate with and benefit from diversion
- Whether the available diversion program fits the defendant's needs
- The impact of the diversion on the community
- The recommendations, if any, of the police
- The recommendations, if any, of the victim
- Provisions which have been made for restitution to the victim, if any
- Any mitigating circumstances

To apply for a diversion, you must complete the attached application and submit it to the City Prosecutor's Office at 900 Massachusetts Street, Suite 200, Lawrence, Kansas 66044. Your diversion application must be accompanied by a drug and alcohol evaluation prepared by an approved agency. You have the right to employ legal counsel to represent you in this process, but you are not required to have legal counsel to apply for diversion.

After you submit your application and drug and alcohol evaluation, the City Prosecutor's Office will review the application and evaluation and will notify you as to whether the diversion application will be granted or denied. The City Prosecutor may require a diversion conference with you as part of the review process. If you are granted a diversion, the City Prosecutor will prepare a written diversion agreement for your review and signature.

DRUG & DRUG PARAPHERNALIA DIVERSION APPLICATION

Complete and Return this Application to:
The City Prosecutor of Eudora, Kansas
900 Massachusetts Street, Suite 200
Lawrence, Kansas 66044

FOR OFFICE USE ONLY:

Case Number: _____

Date Received: _____

Grant:

Deny:

PERSONAL INFORMATION:

First Name _____ Middle Name _____ Last Name _____

Address _____ City _____ State _____ Zip _____

Home Telephone Number _____

Email Address _____

If approved, how do you want to receive the diversion agreement? (Check one) Email U.S. Mail

Date of Birth _____ Driver's License Number and State _____

Social Security Number _____

ATTORNEY CONTACT INFORMATION:

Attorney's Name _____ Firm _____

Address _____ City _____ State _____ Zip _____

Telephone Number _____ Email Address _____

EMPLOYMENT INFORMATION:

Current Employer's Name _____ Start Date _____

Address _____ City _____ State _____ Zip _____

Salary _____ Job Title/Position _____

Most Recent Former Employer's Name _____ Start Date _____

End Date _____ Job Title/Position _____

Salary _____ Reason for Leaving _____

Address _____ City _____ State _____ Zip _____

CRIMINAL HISTORY:

Please identify **ALL** prior or pending offenses, including criminal, traffic, and juvenile offenses. You must include those offenses that were expunged, plea bargained, or dismissed. Be advised that the failure to provide an accurate criminal history may result in the denial of your application or the subsequent revocation of your agreement:

Date of Conviction	Offense Including Severity Level	Jurisdiction/Location	Disposition

MITIGATING CIRCUMSTANCES:

Please explain why placing you on diversion would best serve the interests of justice and the community.

Please explain any mitigating factors or circumstances concerning the charges in this case.

Please explain why you believe you could successfully complete diversion.

I hereby certify and attest that I have read and understand the accompanying Drug & Drug Paraphernalia diversion policy, that I have read and understand this application, and that all of the information provided herein is true and correct to the best of my knowledge. I further acknowledge that giving false information in connection with this diversion application may result in a denial of this application or the subsequent revocation of any diversion agreement.

Signature

Date:

Approved Drug and Alcohol Evaluation Facilities

DOUGLAS COUNTY AREA PROVIDERS

Haskell Indian Nations University
Health Center
Lawrence, Kansas
(785) 843-3750

Professional Treatment Services, LLC
3205 Clinton Parkway Court
Lawrence, Kansas
(785) 843-5483

Heartland Clinical Consultants
544 Columbia Drive, Suite 3B
Lawrence, Kansas
(785) 842-7296

DCCCA, Inc.
3312 Clinton Parkway
Lawrence, Kansas
(785) 841-4138

Alpha Recovery Center
5040 Bob Billings Parkway, Suite B
Lawrence, Kansas
(785) 842-6300

PROVIDERS IN SURROUNDING COMMUNITIES

Eisenbarth & Associates
514 Washburn Street
Topeka, Kansas
(785) 234-4231

Sunflower Alcohol/Drug Safety
Action Project
112 SE 7th, Suite F
Topeka, Kansas
(785) 232-1415

Cypress Recovery, Inc.
230 S. Kansas Avenue
Olathe, Kansas
(913) 764-7555

Heartland Clinical Consultants
5040 SE 28th Street, Suite F
Topeka, Kansas
(785) 272-2279