Minor In Possession Diversion/Transport Open Container Information Sheet

The following guidelines have been adopted by the Wichita City Attorney's Office for the Minor in Possession Diversion program in Wichita Municipal Court.

Diversion is a **privilege** afforded an accused and not a right. No presumption in favor of diversion exists in any case, and the burden of persuasion rests with the applicant to establish that a diversion agreement will best serve the ends of justice and the interests of the community, public safety and the rights of victims.

It is not required that the defendant have an attorney for the purpose of diversion, however, a defendant has the right to employ an attorney and have him/her present throughout the diversion process.

Eligibility: Factors Considered

In determining whether or not diversion is appropriate, the City Prosecutor will consider a number of factors. Some of these factors include:

You have not had a conviction or Deferred Judgment and/or Diversion within 5 years of offense.

1. The nature of the crime and the circumstances surrounding it.
2. Any special characteristics and circumstances of the defendant.
3. Whether the defendant is a first-time offender.
4. Whether the diversion program is appropriate to the needs of the defendant.
5. The impact of diversion on the community.
6. Recommendations of the involved law enforcement community.
7. Recommendations, if any, of the victim.
8. The amount of restitution, if applicable, owed by the defendant.
9. Any mitigating or aggravating circumstances surrounding the crime.
10. Whether the defendant had a conviction or diversion within 5 years of offense.

You have not had a conviction or Deferred Judgment and/or Diversion for such a crime or similar crime within five years of the date of offense.

Procedures

A $25 non-refundable application fee is to be paid to Municipal Court prior to the initiation of the diversion process. You must apply for the diversion within 30 days from your initial appearance. The City Prosecutor will review requests for diversion and may require a diversion conference with the applicant. Please review the following carefully:

A. The diversion application **must** be completed on the form provided by the Clerk of the Municipal Court. Photocopied reproductions will not be accepted.

B. A minimum payment of $200 of all diversion fees are due at the time of signing the agreement. All remaining fines and costs are due within ninety days.

C. The defendant or the defendant's attorney will be notified if the diversion application has been approved. If the application is denied, the defendant or the defendant's attorney will be notified in writing.

The Diversion Agreement

If the City Prosecutor approves a diversion agreement, the terms and conditions will be reduced to writing for approval and signature by both parties. The executed diversion agreement will be filed with the Municipal Court and criminal proceedings will be suspended as long as the defendant fulfills the terms and conditions of the diversion agreement. Upon successful completion of the agreement, the City Prosecutor will move to dismiss the charge(s) with prejudice with costs assessed to the defendant.

If at any time during the diversionary period the City Prosecutor finds that the defendant is no longer fulfilling the terms of the agreement, the City Prosecutor will file a Motion to Revoke the agreement and resume criminal proceedings.

The charges for a Minor in Possession of alcohol or Cereal Malt Beverage will be diverted for a 6 month period.

Fees: One-half of all fees must be paid in full at the time the agreement is signed. The remainder must be paid within ninety days of signing the diversion contract.

Fine	$200.00
Diversion Fee	$100.00
Court Costs	$102.00 (includes $25.00 application fee)*
Total	$402.00

As a condition of the diversion, a drug and alcohol safety action program must be completed within ninety days of signing the diversion agreement.

Court Approved drug and alcohol safety action programs:

AGENCY	PHONE #	ADDRESS	SERVICES
A New Dimension	265-8600	2422 S. Seneca A.	
ADAPT	721-0971	9505 W. Central, Suite 103	
A Clear Direction	260-9101	162 N. Hillside	
Advance Counseling Solutions , LLC	788-1664	9415 E. Harry, Suite 404	
Addiction Counseling Services	263-4822	1101 N. West St.	Bi-lingual Services
Adolescent Adult Family Recovery	943-2051	3540 W. Douglas	
Atishwin	681-2533	937 S. Bluffview	
Behavioral Consultants, Inc.	263-2155	1047 N. Market	
Changing Habits, LLC	409-5242	1115 S. Glendale. Suite 204 (Parklane Shoppping Center)	
Counseling Inc.	295-4800	714 S. Hillside	
Higher Ground	262-2060	247 N. Market	Spanish only
Insight Counseling Center, Inc.	440-4804	4618 E. Central, Suite 30	
Knox Center	265-8511	2924 E. Douglas	
Recovery Unlimited	W- 941-9948 E- 612-9002	West- 3312 W. Douglas East- 555 N. Woodlawn, Suite #125	
So. Central Ks Court Services	1-620-488-3357	1919 N. Amidon, Suite 110	
STOP	686-7884	8911 E. Orme, A	
Yale Crowberg Learning Center	841-6549 613-2948	313 N. Seneca #110	

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City of Wichita-Municipal Court
455 N. Main Street • Wichita, KS 67202

Minor in Possession Diversion Application

A non-refundable $25.00 application fee must be paid with this application to initiate the Diversion process.

Docket Number: _____ Attorney: _____

Court Date: _____

ALL ANSWERS MUST BE COMPLETE. TYPE OR PRINT CLEARLY.

LAST NAME _____ FIRST NAME _____ MIDDLE NAME _____
ADDRESS _____ CITY _____ STATE _____ ZIP _____
TELEPHONE NUMBER-HOME (_____)_____ WORK (_____)_____ CELL (_____)_____

LIST ALL PREVIOUS ADDRESSES FOR THE LAST 3 YEARS:
Address_____ City_____ State_____ Zip_____
Address_____ City_____ State_____ Zip_____
Address_____ City_____ State_____ Zip_____

LIST ANY ALIAS/MAIDEN NAME(S)_____SOCIAL SECURITYNUMBER_____

RACE:_____ SEX:_____

DATE OF BIRTH_____/_____/_____ SINGLE_____ MARRIED_____ DIVORCED_____ SEPARATED_____
IF MARRIED, SPOUSE'S FULL NAME_____DATE OF BIRTH_____/_____/_____
NAME ALL DEPENDENTS _____DATE OF BIRTH_____/_____/_____
_____DATE OF BIRTH_____/_____/_____

DRIVERS LICENSE NUMBER_____STATE OF ISSUANCE_____

IF STUDENT, LIST PERMANENT/PARENT'S ADDRESS_____

CLOSEST RELATIVE NOT PRESENTLY LIVING WITH YOU: NAME_____
Address_____ City_____ State_____ Zip_____
Phone Number_____ Relationship_____

WORK EXPERIENCE

PRESENT EMPLOYER_____ HOW LONG_____ TITLE_____
ADDRESS_____ CITY_____ STATE_____ PHONE_____
WEEKLY SALARY $_____ SUPERVISOR'S NAME_____

COMPANY NAME _____ ADDRESS_____
CITY_____ STATE_____ SUPERVISOR'S NAME_____
FROM_____ TO_____ JOB TITLE_____

COMPANY NAME _____ ADDRESS_____
CITY_____ STATE_____ SUPERVISOR'S NAME_____
FROM_____ TO_____ JOB TITLE_____

COMPANY NAME _____ ADDRESS_____
CITY_____ STATE_____ SUPERVISOR'S NAME_____
FROM_____ TO_____ JOB TITLE_____

HIGHEST LEVEL OF EDUCATION COMPLETED_____
WHAT COUNTY ARE YOU CURRENTLY A RESIDENT OF_____
WHAT STATE_____ HOW LONG_____

IF YOU MOVED TO SEDGWICK COUNTY WITHIN THE PAST 5 YEARS, WHERE DID YOU LIVE PREVIOUSLY AND WHAT PROMPTED THE MOVE? _____

MEDICAL HISTORY – (BRIEF LIST)

PHYSICAL CONDITION_____

LIST ANY PREVIOUS PSYCHIATRIC OR PSYCHOLOGICAL TREATMENT RECEIVED_____

CRIMINAL RECORD
(ATTACH ADDITIONAL PAGES IF NECESSARY)

List **ALL** prior or pending offenses, including criminal, traffic and juvenile.
Include **ALL** arrests and convictions, even if subsequently expunged.
Also, list any other diversion programs you have previously participated in.

Date	Offense	Location	Disposition	Parole/Probation Officer

PLEASE STATE IN DETAIL THE FACTS WHICH CAUSED THE **CURRENT** CHARGES AGAINST YOU TO BE FILED: _____

PLEASE STATE WHAT YOU BELIEVE TO BE ANY MITIGATING FACTORS CONCERNING THE CRIME(S) WITH WHICH YOU ARE CHARGED: _____

EXPLAIN WHY YOU FEEL YOU COULD SUCCESSFULLY COMPLETE THE DIVERSION PROGRAM:

I have read the foregoing application. All of the information is true and correct. I understand that if any of the foregoing information is not true and correct, this may be a basis for denial of the diversion or a revocation of my diversion. I request a continuance of the court date for my case to allow the City time to review my application and obtain the information necessary to determine whether or not a diversion can be granted. I understand that I have a right to a speedy trial and I knowingly and voluntarily waive the right to speedy trial.

_____ Defendant's Signature

_____ Date

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