

Criminal Court Coordinator, 422nd District Court
422nd Drug and Mental Health Court Program.
1902 E. US 175, Kaufman, Texas 75142
(469) 376-4666

DRUG COURT PROGRAM APPLICATION

IMPORTANT: APPLICATIONS WILL BE REVIEWED BY DRUG COURT PANEL STAFF.

Dear Candidate:

Please complete the following application for the 422nd Drug and Mental Health Court program. You have been identified by your attorney and the assistant district attorney assigned to your case as a potential candidate for this specialty court program. Complete the application in full and return to your attorney so they can submit it to the treatment panel for review and consideration. Should you have any questions or issues in completing the document please seek guidance from your attorney.

This program is approximately 9 to 18 months in length. It encompasses three phases which are approximately 3 months each respectively. Specifics required of all participants are the following:

- Meet with the judge based on what stage of the program you are involved in. The beginning required weekly attendance.
- Pay the \$500 program participation fee. (This is required and will not be waived).
- Attend all community supervision appointments and provide clean UAs as directed by your CSO.
- Complete CSR and make payments as ordered through your community supervision
- Attend and actively participate in all group and/or individual therapy sessions. The dates and times will be determined by the treatment provider.
- Follow through with all other resources and requirements as directed by the treatment panel.

Attorneys:

Once the candidate has completed the application, please review to ensure that the application is complete. Incomplete applications **will not** be considered.

Attorney Name (Printed): _____

Attorney Signature: _____

Attorney Contact Information: _____

Assigned Asst District Attorney Name: _____

Assigned Asst. District Attorney Signature: _____

The 422nd District Drug and Mental Health Court Program does not discriminate against qualified applicants on the basis of race, color religion, gender, national origin, marital status, handicap (disability), or veteran status or as otherwise prohibited by federal, state, or local law.

Criminal Court Coordinator, 422nd District Court
422nd Drug and Mental Health Court Program.
1902 E. US 175, Kaufman, Texas 75142
(469) 376-4666

DRUG COURT PROGRAM APPLICATION

IMPORTANT: APPLICATIONS WILL BE REVIEWED BY DRUG COURT PANEL STAFF.

PERSONAL INFORMATION: Male Female

First Name: _____ Middle: _____ Last Name: _____ Suffix: _____

Alias: _____

Social Security # (last four): _____ DL State: _____ DL/ID#: _____ DL Status: _____

Address: _____ City: _____ State: _____ ZIP: _____

Living Arrangement: Independent Homeless Dependent with (Name and Relationship)

Phone Number: _____ Alternate Number: _____ Alternate Number: _____

Date of Birth: _____ Marital Status: Single Married Separated Divorced Widowed

Spouse's Name: _____ Spouse's Occupation: _____

Race/Ethnicity: African American Caucasian Multi-Racial Asian/Pacific Islander

Hispanic/Latino Native American Other: _____

Emergency Contact: _____ Phone(s): _____

NAMES OF CHILDREN: Check this box if you do not have any children

Children (use back of page if there are more):

Name: _____ Living with Client: Yes No/Lives with: _____

Attending School: Yes No School Attending: _____

Male: Female: DOB: _____ Age: _____

CPS Involvement: Yes No If Yes, please explain:

Name: _____ Living with Client: Yes No/Lives with: _____

Attending School: Yes No School Attending: _____

Male: Female: DOB: _____ Age: _____

CPS Involvement: Yes No If Yes, please explain:

The 422nd District Drug and Mental Health Court Program does not discriminate against qualified applicants on the basis of race, color religion, gender, national origin, marital status, handicap (disability), or veteran status or as otherwise prohibited by federal, state, or local law.

Criminal Court Coordinator, 422nd District Court
422nd Drug and Mental Health Court Program.
1902 E. US 175, Kaufman, Texas 75142
(469) 376-4666

DRUG COURT PROGRAM APPLICATION

IMPORTANT: APPLICATIONS WILL BE REVIEWED BY DRUG COURT PANEL STAFF.

Name: _____ Living with Client: Yes No/Lives with: _____

Attending School: Yes No School Attending: _____

Male: Female: DOB: _____ Age: _____

CPS Involvement: Yes No If Yes, please explain:

Name: _____ Living with Client: Yes No/Lives with: _____

Attending School: Yes No School Attending: _____

Male: Female: DOB: _____ Age: _____

CPS Involvement: Yes No If Yes, please explain:

CHILD SUPPORT:

N/A Paying Current Paying Not Current Not Paying Support Enforcement Involved: Yes No

List others residing in the home other than children or spouse:

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

Name: _____ Relationship: _____

The 422nd District Drug and Mental Health Court Program does not discriminate against qualified applicants on the basis of race, color religion, gender, national origin, marital status, handicap (disability), or veteran status or as otherwise prohibited by federal, state, or local law.

Criminal Court Coordinator, 422nd District Court
422nd Drug and Mental Health Court Program.
 1902 E. US 175, Kaufman, Texas 75142
 (469) 376-4666

DRUG COURT PROGRAM APPLICATION

IMPORTANT: APPLICATIONS WILL BE REVIEWED BY DRUG COURT PANEL STAFF.

CRIMINAL HISTORY: (If necessary, use the back side or another sheet of paper to list criminal charges/history)

| Date of Arrest | CURRENT CHARGES: (list all): | Court Case Numbers: |
|----------------|------------------------------|---------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Attorney Name: _____ Attorney Contact Info: _____

Prosecutor Assigned to Case: _____

Jail Status: In Jail Not in Jail Date Admitted to Jail: _____ Date Released from Jail: _____

Do you have any pending charge(s) in another county? Yes No If yes, name of county(s): _____

Charges: _____

| Date of Arrest | CRIMINAL HISTORY List Charges | City/State |
|----------------|----------------------------------|------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Current charge or previous conviction of a violent crime or Sex Offense, other than Domestic Violence: Yes No

If Yes: What Offense? _____

Previous conviction for Domestic Violence: Yes No Outstanding Warrants: Yes No

Pending Criminal Charges: Yes No Previous Court Failure to Appear: Yes No

Currently on Probation: Yes No

Probation Officer: _____ PO Contact Info: _____

Gang Affiliation: Current Previous None

If current or previous affiliation, please explain: _____

Prior Adjudications: Yes No Number of Prior Adjudications: _____

History of Prior Drug Court Participation: None Successful Voluntary Withdrawal Unsuccessful Absconded

The 422nd District Drug and Mental Health Court Program does not discriminate against qualified applicants on the basis of race, color religion, gender, national origin, marital status, handicap (disability), or veteran status or as otherwise prohibited by federal, state, or local law.

Criminal Court Coordinator, 422nd District Court
422nd Drug and Mental Health Court Program.
1902 E. US 175, Kaufman, Texas 75142
(469) 376-4666

DRUG COURT PROGRAM APPLICATION

IMPORTANT: APPLICATIONS WILL BE REVIEWED BY DRUG COURT PANEL STAFF.

EMPLOYMENT HISTORY:

Current Employment Status: Unemployed Full-Time Part-Time Disabled Retired Student

If Employed:

Name of Current Employer: _____

Average number of hours worked per week: _____

Length of time with current employer: _____ Months _____ Years

Primary Source of Support:

| | | |
|--|---|---|
| <input type="checkbox"/> Adoption Subsidy | <input type="checkbox"/> Disability | <input type="checkbox"/> Family |
| <input type="checkbox"/> Foster Care Subsidy | <input type="checkbox"/> Retirement Plan | <input type="checkbox"/> Salary/Wages |
| <input type="checkbox"/> Social Security | <input type="checkbox"/> Social Security Disability | <input type="checkbox"/> Veteran's Benefits |
| <input type="checkbox"/> SNAP/AFDC | <input type="checkbox"/> Workers Compensation | <input type="checkbox"/> None |
| <input type="checkbox"/> Other: _____ | Gross Monthly Income (from all sources: \$ _____) | |

Employment History (previous job experiences and why you are no longer employed there):

What type of work are you interest in?

Describe any previous volunteer involved you have had:

Describe any community or church involvement you have been a part of:

Transportation Status:

Reliable Transportation No Reliable Transportation Comments: _____

Make/Model of Vehicle(s): _____ Vehicle is Owned Leased

Prior Military Service (Branch, Rank, Years in Service): _____

Do you have a DD 214? Yes No Discharge Status: _____ Registered with VA Services: Yes No

The 422nd District Drug and Mental Health Court Program does not discriminate against qualified applicants on the basis of race, color religion, gender, national origin, marital status, handicap (disability), or veteran status or as otherwise prohibited by federal, state, or local law.

Criminal Court Coordinator, 422nd District Court
422nd Drug and Mental Health Court Program.
1902 E. US 175, Kaufman, Texas 75142
(469) 376-4666

DRUG COURT PROGRAM APPLICATION

IMPORTANT: APPLICATIONS WILL BE REVIEWED BY DRUG COURT PANEL STAFF.

EDUCATION HISTORY:

Highest Education Completed:

- ___ No High School Diploma: Last Grade Completed: _____ ___ GED ___ High School Diploma
- ___ Some Trade School ___ Trade School Graduate ___ Major/Minor: _____
- ___ Some College ___ College Graduate 2-year Program ___ Major/Minor: _____
- ___ College Graduate 4-year program ___ Major/Minor: _____
- ___ Advanced Degree ___ Major/Minor: _____
- ___ Currently Attending School Name of School Attending: _____

If you do not have your High School Diploma or GED, explain what led you to drop out: _____

Did you have an Individualized Education Program ("IEP") when in school? Yes No Unsure
Were additional services provided while you were in school? (Tutoring, specialized classes, counseling, speech, or other therapies)? _____

What difficulties/issue did you have in school?

HOME LIFE:

Number of times moved in the last three years? _____ Comments: _____
Length of time at current primary address? _____ Comments: _____

Do you have any close friends? Who? Are they involved with the court system?

Trauma/Loss

Has there been any significant trauma or loss in your life (e.g., loss of a family member or friend, separation from a close relative)?

The 422nd District Drug and Mental Health Court Program does not discriminate against qualified applicants on the basis of race, color religion, gender, national origin, marital status, handicap (disability), or veteran status or as otherwise prohibited by federal, state, or local law.

Criminal Court Coordinator, 422nd District Court
422nd Drug and Mental Health Court Program.
1902 E. US 175, Kaufman, Texas 75142
(469) 376-4666

DRUG COURT PROGRAM APPLICATION

IMPORTANT: APPLICATIONS WILL BE REVIEWED BY DRUG COURT PANEL STAFF.

Your turn to share.... anything else you feel is important for us to know:

The 422nd District Drug and Mental Health Court Program does not discriminate against qualified applicants on the basis of race, color religion, gender, national origin, marital status, handicap (disability), or veteran status or as otherwise prohibited by federal, state, or local law.

Criminal Court Coordinator, 422nd District Court
422nd Drug and Mental Health Court Program.
1902 E. US 175, Kaufman, Texas 75142
(469) 376-4666

DRUG COURT PROGRAM APPLICATION

IMPORTANT: APPLICATIONS WILL BE REVIEWED BY DRUG COURT PANEL STAFF.

RELEASE OF INFORMATION

The purpose of, and need for, this exchange of information is to provide information about my eligibility for, and participation in the 422nd District Drug and Mental Health Court Programs' application process. The information to be exchanged may include information about any diagnosis which will include, but is not limited to: medical history, including current assessments, diagnosis, treatment and medications, arrest and prior criminal record, risk and alcohol/drug use assessment and diagnosis information. I authorize the disclosure and release of the aforementioned information to the 422nd District Drug and Mental Health Court Program team members.

The 422nd District Drug and Mental Health Court Program team members are: the presiding Drug Court Judge, Assistant District Attorney, Public Defender, or other Defense Counsel, Community Supervision Officer(s), and other Kaufman County treatment providers as needed.

I agree that the disclosure of the Application, Intake/Screening and Treatment information, prior to the Drug Court termination, sentencing, and /or revocation of this consent shall not be a breach of my right to confidentiality.

I understand that any disclosure made regarding mental health and substance abuse treatment is bound by Part 2 of Title 42 of the Code of Federal Regulations (42CFR, part 2), which governs the confidentiality of mental health and substance abuse patient records and that recipients of this information may re-disclose it only in connection with their official duties, and only with respect to these particular criminal proceedings.

Signature of Applicant

Date

Name of Attorney (Please Print)

Signature of Attorney

Date

The 422nd District Drug and Mental Health Court Program does not discriminate against qualified applicants on the basis of race, color religion, gender, national origin, marital status, handicap (disability), or veteran status or as otherwise prohibited by federal, state, or local law.

DRUG COURT PROGRAM APPLICATION

IMPORTANT: APPLICATIONS WILL BE REVIEWED BY DRUG COURT PANEL STAFF.

SUBSTANCE ABUSE HISTORY

Drug of Choice: Enter **P**-Primary Drug of Choice, **S**-Second Drug of Choice, **T**- Any substance you have used **in your lifetime**

| P-S-T | Substance | Age of First Use | Date of Last Use | Ever Injected? |
|--------------|---|-------------------------|-------------------------|--|
| | Alcohol | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Marijuana – Cannabinoids (Delta 8, 9, 10) | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Cocaine | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Crack | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Methamphetamine | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Methadone | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Steroids/Inhalants | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Ketamine (Special K)/PCP/DXM | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Salvia | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Spice – Synesthetic Marijuana | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Bath Salts | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | MDPV "Molly" | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | LSD/Mescaline/Psilocybin (Mushrooms) | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | MDMA (Ecstasy)/Rohypnol/GHB | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | RX: Stimulants – Adderall, Ritalin, etc. | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | RX: Depressants – Xanax, Quaalude, etc | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | RX: Opiates – Oxy, Roxy, Lortab, etc | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| | Other(s) : | | | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Are you a current Tobacco Smoker? Yes No How much tobacco do you smoke per day? _____

Are you interest in information about Smoking Cessation Programs? Yes No

History of Substance Abuse Treatment:

___ Never had any S. A. Treatment

___ Court-Ordered S.A. Treatment Year: _____ Location: _____ Completed: Yes No

___ Other S.A. Treatment Attended Year: _____ Location: _____ Completed: Yes No

Year: _____ Location: _____ Completed: Yes No

Were you under the influence of any substance when arrested for this charge or any other charges? Yes No

If yes, please explain: _____

The 422nd District Drug and Mental Health Court Program does not discriminate against qualified applicants on the basis of race, color religion, gender, national origin, marital status, handicap (disability), or veteran status or as otherwise prohibited by federal, state, or local law.

Criminal Court Coordinator, 422nd District Court
422nd Drug and Mental Health Court Program.
1902 E. US 175, Kaufman, Texas 75142
(469) 376-4666

DRUG COURT PROGRAM APPLICATION

IMPORTANT: APPLICATIONS WILL BE REVIEWED BY DRUG COURT PANEL STAFF.

HEALTH HISTORY:

Current Medications: Yes No If Yes, Condition is: Physical Psychological Both
Medications:

Ever been treated for substance abuse through a pharmacological intervention such as Methadone Treatment or
Suboxone/Subtex? Yes No

Where? When? Comments: _____

Pregnant: Yes No N/A Due Date: _____ Hospital: _____ Doctor: _____

Comments:

Medical Insurance: None Medicaid Medicare Private: Carrier: _____

History of mental health condition(s): Yes No Explain: _____

History of medical condition(s): Yes No Explain: _____

History of Communicable Disease: Hep B Hep C HIV Tuberculosis

The 422nd District Drug and Mental Health Court Program does not discriminate against qualified applicants on the basis of race, color religion, gender, national origin, marital status, handicap (disability), or veteran status or as otherwise prohibited by federal, state, or local law.

