



COUNTY ATTORNEY'S OFFICE

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TRAFFIC OFFENSE/FISH & GAME VIOLATION
DIVERSION APPLICATION

(DUI APPLICANT'S MUST USE CRIMINAL APPLICATION)

copy of citation /valid identification must accompany this diversion application

Name: _____ Date: _____
(PRINT FULL NAME)

Street Address: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____

Phone # _____ Work#: _____

Email address: _____

Driver's License Number: _____ State: _____

Citation#: _____ Date Issued: _____

Agency That Issued The Citation To You: _____

Have you been issued any citations within the last 5 years? Yes / NO (circle one)
If yes - provide the number of citations issued: _____

Have you ever been arrested or charged with a crime? Yes / NO (circle one)
If yes - provide the number of arrests/charges: _____

You are hereby notified that you will be considered for the Riley County Diversion program upon filing this Application. Any false or misleading statements on an application for Diversion will bar the application from participation in the Diversion program.

The prosecutor is prohibited from entering into a Diversion Agreement in lieu of being prosecuted for driving under the influence of alcohol and/or; drugs if said Defendant has a prior conviction of such an offense or has participated in a Diversion Agreement for such an offense.

Diversion is a privilege, not a right and may be offered or denied an applicant for any reason permitted by law. If a Defendant is granted a Diversion and successfully completes all requirements of the Diversion Agreement entered into with Riley County, the case against the Defendant will be dismissed with prejudice. You will be required to agree or stipulate that you committed the violation as charged on your citation. If you do not successfully complete diversion, the case will be set for trial on the agreed facts.

The Defendant will be financially responsible for all court costs, fines, and diversion fees associated with the diversion process.

I hereby apply to participate in the Riley County, Kansas Traffic Diversion Program. I understand that if I am granted a Diversion in this matter, I am waiving my right to a speedy trial.

I agree to and authorize release of police reports and any information available concerning me to an authorized counselor or therapist.

I have read and understand the foregoing application. All 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 Diversion or Revocation of Diversion. I admit the traffic offense alleged in the Uniform Notice to Appear and Complaint.

_____/_____
DEFENDANT (please use legal signature) DATE

DEFENDANT'S PRINTED NAME

Subscribed and sworn to before me this _____ day of _____, _____.

Notary Public My Appointment Expires: