

**YORK COUNTY COURT OF COMMON PLEAS  
DUI WELLNESS COURT REFERRAL FORM**

DEFENDANT: \_\_\_\_\_ OTN: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DOB: \_\_\_\_\_ SS#: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

CHARGES: \_\_\_\_\_ BAIL/YCP: (circle one)

ARE YOU IN NEED OF INTERPRETER SERVICES: Y/N IF YES PLEASE SPECIFY LANGUAGE \_\_\_\_\_

VETERAN: Y/N HAVE YOU SERVED ACTIVE COMBAT: Y/N ARE YOU A PURPLE HEART RECIPIENT: Y/N

DO YOU HAVE THE FOLLOWING?

HIGH SCHOOL DIPLOMA Y/N GED Y/N BIRTH CERTIFICATE Y/N PHOTO IDENTIFICATION Y/N

Presumptive Qualifying Characteristics.

\_\_\_\_\_ An individual charged with any Tier Three Third Offense, Tier Three Second Offense, or Tier Two Third Offense DUI. Eligible offenses include 3802(c) BAC .16 or higher, 3802(a1) Implied Consent Violation and 3802(d) Controlled Substances.

\_\_\_\_\_ The individual states to the police or Magisterial District Judge that he/she is an alcohol/drug abuser at the time of arrest.

\_\_\_\_\_ The individual's family, friends, attorney, or probation officer, etc. indicated that he/she is an alcohol/drug abuser.

Please process the "DUI Wellness Court Referral Form" as follows:

1. Check all items above that apply to the applicant.
2. Attach copies of all pending criminal complaints and probable cause affidavits to the DUI Court Referral Form.
3. Attach the CRN evaluation. If the CRN evaluation has not yet been completed, follow the procedure outlined in the *DUI CRN Referral* received from the Magisterial District Judge..
4. A timed stamped copy needs to be given to the Clerk of Courts and York County Adult probation within 30 day after arraignment at 45 N. George St. York, PA 17401.
5. Any questions please call the DUI court administrator at 717-771-9602.

Preparer's Name & Title: \_\_\_\_\_ Date: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

**FOR COURT USE ONLY:**

\_\_\_\_\_ Eligible \_\_\_\_\_ Ineligible due to: \_\_\_\_\_

\_\_\_\_\_ Eligible outside guidelines due to: \_\_\_\_\_

**(FORWARD TO TREATMENT COURT ADMINISTRATOR)**